Ministry of
Children and Family
Development

2004/05
Annual Service Plan Report

BRITISH
COLUMBIA

www.gov.bc.ca

National Library of Canada Cataloguing in Publication Data
British Columbia. Ministry of Children and Family Development.
Annual report. — 2004/05 —

Annual.
ISSN 1703-3594 = Annual report — British Columbia Ministry of Children and Family Development.

Title: Ministry of Children and Family Development Annual Report.

LC176.2.B7B74 353.8'8'0971105 C2002-960129-0

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Published by the Ministry of Children and Family Development
2353-2

* *Refer to note on page 3.*

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PLEASE NOTE: On June 16, 2005, the government ministries were re-organized to reflect the new cabinet responsibilities. Many of the website addresses and links in this printed report may have changed following the government re-organization.

- A list of the new ministries is available on the government website at http://www.gov.bc.ca — follow the links to Ministries and Organizations.
- An index of all 2004/05 Annual Service Plan Reports, with up-to-date website links, is available online at http://www.bcbudget.gov.bc.ca/annualreports/.

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Message from the Minister and Accountability Statement

I am pleased to present the 2004/05 Annual Service Plan Report for the Ministry of Children and Family Development. The ministry's primary responsibility remains the health, safety and well-being of the thousands of individuals and families that receive our programs and services. The past year has been a positive one for the ministry and one of many accomplishments.

Child welfare best practice continues to show that children and youth attain better outcomes when they are able to remain within their own families and communities. This is especially true of the Aboriginal community. The ministry has worked toward this by shifting child welfare practice to promote the use of out-of-care placements and alternative dispute resolution processes as alternatives to taking children into ministry care.

In June 2004, the child care program was transferred to the ministry from the Ministry of Community, Aboriginal and Women's Services. The ministry has taken over budgetary, legislative and policy responsibility for the program; delivery of the subsidy program remains with the Ministry of Human Resources for now.

Over the past four years, we have been working toward making programs and services more responsive to the people that we serve, by redesigning our service delivery system to be more community-based. The ministry made progress in 2004/05, bringing services closer to communities and families while protecting health and safety. The legislation to create Community Living British Columbia is in place and the board and senior management are prepared to assume a leadership position for services for adults with developmental disabilities this summer. In addition, the ministry endorsed the principle of a Joint Multi-Year Plan to achieve Aboriginal governance of child and family services.

Other achievements in 2004/05 included:

- Providing new and enhanced child care subsidies for families to make child care more accessible, through a $33 million boost.
- Implementing the "FRIENDS" pilot program to educate Grade Four and Five students about anxiety disorders.
- Producing, in partnership with the Knowledge Network, a series of three documentaries about child and youth mental disorders.
- Expanding the scope of existing Aboriginal agencies to increase the range of services they deliver both on- and off-reserve.

- Funding several research projects related to early learning, special needs, child and family development and services for adults with developmental disabilities.

The past year has been one of both challenges and successes for the ministry, and I am proud of the progress the ministry has made toward achieving its vision and goals.

The 2004/05 Ministry of Children and Family Development Annual Service Plan Report compares the actual results to the expected results identified in the ministry's 2004/05 Service Plan. I am accountable for those results as reported.

Honourable Stan Hagen
Minister of Children and Family Development

June 15, 2005

Message from the Minister of State and Accountability Statement

I am pleased to report on Early Childhood Development (ECD) activities in British Columbia for 2004/05. During this time, the province continued to make significant progress in enhancing many ECD services and initiatives to meet the diverse needs of over 248,000 children, from birth up to six years of age in British Columbia.

Research tells us that the most important developmental years are the first six years of a child's life. Making strategic investments in ECD programs encourages healthy and optimal development of children and leads to better outcomes for individuals, families and communities.

ECD accomplishments during 2004/05 included:

- Establishing 18 "Success by 6" initiatives with community partners, reaching 110 communities.
- Conducting research through the Human Early Learning Partnership, which involved university, government and community partners in assessing the learning readiness of 95 per cent of kindergarten children in B.C.
- Providing support for Autism Spectrum Disorder (ASD) intervention services for over 3,000 children.
- Introducing new funding options for parents of children with ASD and establishing a toll-free ASD information telephone line.
- Supporting several research projects to increase the knowledge base about the effectiveness of ASD intervention strategies and program delivery models.
- Increasing the number of services provided to families for Supported Child Development by 538.
- Partnering with six other provincial and territorial governments to establish the new Canada Northwest Fetal Alcohol Spectrum Disorder Research Network.
- Providing Aboriginal ECD programs in 41 communities.
- Expanding Children First initiatives to 30 communities.

With families, communities, service providers and government working together, I am confident that we are ensuring our young children — our most precious citizens — have every opportunity to thrive. We are paving the way to a brighter future for thousands of B.C. children and their families.

B.C.'s children are our future and nothing gives me greater satisfaction than to serve the province by leading this initiative.

I am the Minister of State for Early Childhood Development and, under the *Balanced Budget and Ministerial Accountability Act*, I am accountable for the following results:

- Developing a plan to co-ordinate all cross-government initiatives on Autism Spectrum Disorder, and presenting it to the Government Caucus Committee on Cross-Government Initiatives.

- Developing a strategy to help eliminate waitlists for supported child development (formerly supported child care) for children up to six years of age, and presenting it to the Government Caucus Committee.
- Developing a strategy to increase public awareness about the risks of alcohol consumption during pregnancy and the risks of Fetal Alcohol Spectrum Disorder, and presenting it to the Government Caucus Committee.

These plans and strategies were developed and presented to the Government Caucus Committee on Cross Government Initiatives, and implementation is ongoing.

Honourable Linda Reid
Minister of State for Early Childhood Development

June 15, 2005

Highlights of the Year

The Ministry of Children and Family Development (MCFD) would like to highlight the following key accomplishments in building stronger families and communities throughout British Columbia.

New and Expanded Services

- **New and enhanced child care subsidies were provided through a $33 million boost** to the child care system in 2004/05. This funding initiative allowed about ten thousand more children to be eligible for subsidy and increased existing subsidies for thousands of B.C. families.
- **18 "Success by 6®" initiatives were established** working with community partners United Way and B.C. credit unions. Reaching 110 communities, these initiatives increase awareness of early childhood development and engage communities in the planning of services.
- **Expanded the use of out-of-care options, Alternative Dispute Resolution (ADR) and other community resources.** Throughout the 2004/05 year the number of children in care remained stable. The number of children in care has dropped from a high of 10,775 reached in June 2001. In March 2005, there were 9,071 children in care.
- **The "FRIENDS" pilot program was implemented to educate Grade 4 and 5 students about anxiety disorders,** in partnership with the Ministry of Education and 35 B.C. school districts. Providing education about early intervention and prevention, the pilot program reached over 22,000 students. "FRIENDS" will be available in all Grade 4 and 5 classrooms in B.C. in 2005/06.
- **To inform British Columbians about child and youth mental disorders, we partnered with the Knowledge Network** to produce a series of three documentaries and a website. Through the personal stories of young people, and interviews with parents and experts, these compelling documentaries outline the early signs, symptoms and treatment for child and youth depression, adolescent anxiety and early onset psychosis.
- **To help young adults with intellectual disabilities participate in post-secondary education** the ministry partnered with STEPS Forward, an inclusive post-secondary society, on an initiative that helps build diverse and inclusive communities throughout B.C.

Increased Flexibility in Service Delivery

- **The ministry provided funding for Autism Spectrum Disorder (ASD) intervention services for over 3,000 British Columbia children.** This initiative permits families to choose from a range of interventions and supports that best meet the needs of their individual children. This individualized approach maximizes positive outcomes for these children.

- **The province passed legislation to create Community Living British Columbia (CLBC).** CLBC's vision and mandate are to create and deliver personalized, community-based and cost-effective services for individuals with disabilities. This is done by ensuring family, friends and community are involved in developing individualized plans and supports.
- **We expanded our innovative 'differential response' program in Vancouver** by placing ministry social workers in community agencies.

Improved Service Quality and Accountability

- **In 2004/05, we continued our emphasis on providing permanent homes for children in care** by placing over 300 children in permanent homes.
- **We assisted B.C.'s licensed non-profit child care providers** through a wide range of supports. These supports included: replacing playground equipment to meet safety standards; replacing other equipment and furnishings; upgrading or repairing existing facilities; creating new group child care spaces; and replacing equipment used in equipment-lending libraries.
- **We funded training for child care providers** on bullying awareness and prevention.
- **In 2004/05, the ministry conducted a financial management review,** resulting in stronger spending controls to ensure that every available tax dollar goes toward the children and adults who need services. We identified and implemented ways to improve procedures for contracting, spending and financial reporting.
- **Developed a common audit tool for delegated Aboriginal agencies,** in partnership with the federal government and Aboriginal agency directors.
- **MCFD increased the number of accredited agencies by 44 in 2004/05 to a total of 94 accredited agencies,** out of a total of 232 agencies requiring accreditation. Accreditation helps improve the quality of services delivered by an organization.
- **All the long-term residents of the Provincial Assessment Centre (formerly Willow Clinic) have been successfully moved to the community.** The moves are consistent with community living philosophy of supporting individuals in the least restrictive environment.

More Culturally-Appropriate Services

- **Improved access to Aboriginal ECD programs and services** by increasing the number of Aboriginal initiatives from 37 to 41. These initiatives help Aboriginal children grow up healthier in more resilient, effective families and supportive communities.
- **The ministry provided information about child care services to families who may face language, cultural or other barriers.** We did this by developing culturally-sensitive child care resources for Aboriginal and multicultural communities and by communicating culturally-relevant information in languages other than English.
- **We completed the service redesign** of family development and youth services which resulted in **reinvestment of $5.5 million in services** delivered by Aboriginal agencies.

- **We developed, renewed and expanded delegation agreements** with Aboriginal child welfare agencies, increasing the capacity of Aboriginal communities to deliver services and making the service delivery system more responsive to Aboriginal cultural needs.
- **We have developed new and innovative ways to deliver services collaboratively with delegated Aboriginal agencies.** For example, we have a partnership with Ktunaxa Kinbasket Child and Family Services to deliver child welfare services to Aboriginal people in the Cranbrook area.

Expanded and New Research Initiatives

- **Government, university and community partners focused on early childhood development** through the Human Early Learning Partnership (HELP) which conducted ground-breaking research to assess the readiness-to-learn of 95 per cent of kindergarten children in the province, making British Columbia the only province in Canada to complete a baseline of school-readiness.
- **Based on this study, Community Asset Maps**[1] were created showing children's development, community resources and areas of vulnerability or need to assess how well communities throughout B.C. are supporting young children and families.
- **The Canada Northwest Fetal Alcohol Spectrum Disorder (FASD) Partnership launched the FASD Research Network** to address high-priority questions and develop better prevention and support strategies for FASD.
- **The ministry partnered with the National Center on Shaken Baby Syndrome** and the Children's and Women's Hospital of B.C. on a multi-year Shaken Baby Syndrome Research Project that emphasizes prevention and early intervention.
- **MCFD co-hosted a Research Roundtable on Prostitution and Sexual Exploitation.** This inter-ministry and inter-sectoral forum was held to share research and best practices information, and to conduct coordinated inter-sectoral planning.

Other accomplishments of the Ministry of Children and Family Development in 2004/05, along with specific objectives and performance measures, are detailed in this Annual Service Plan Report.

[1] These maps are available online at http://www.earlylearning.ubc.ca*.

* *Refer to note on page 3.*

2004/05 Performance-at-a-Glance by Service Plan Goal

This table provides a summary of the ministry's progress made in reaching performance measure targets as stated in the MCFD 2004/05 - 2006/07 Service Plan. Information regarding progress in relation to the goals, and related objectives and measures can be found in the Report on Performance section of this report and in Appendix 1.

Goal 1: Adults with developmental disabilities and children and youth with special needs achieve their full potential, participate in, and contribute to, their communities				
Performance Measure	**2004/05 Target**	**2004/05 Actual**	**Target Met?**	**Reference pages**
Satisfaction of individuals with services received.	Baseline TBD by March 2004	The planned satisfaction survey was not completed.	N/A	33, 76
Number of adults and families of children with special needs who receive direct or individualized funding.	4,200	5,425	✓✓	34, 77
Percentage of children (aged 4 - 6) and youth (aged 17 - 19) with special needs that have completed Transition Plans.	50%	The planned survey was not completed.	N/A	36, 78
Percentage of individuals served in family model homes.	40%	36.0%	✗	38, 78

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable

Goal 2: Children and youth are healthy and safe in their families and communities				
Performance Measure	**2004/05 Target**	**2004/05 Actual**	**Target Met?**	**Reference pages**
Number of new public/private partnerships to raise awareness of and commitment to Fetal Alcohol Spectrum Disorder (FASD) prevention.	1	4	✓✓	41, 79
Percentage (number) of children to age six served on the wait list for supported child development (formerly supported child care).	70% of the 2003/04 baseline (613) or 429 children on the waitlist	618 children on the waitlist	✗	42, 80
Number of community-based initiatives to prevent Fetal Alcohol Spectrum Disorder (FASD).	4	5	✓✓	43, 81
Number of Aboriginal communities with early childhood development (ECD) initiatives.	35	41	✓✓	43, 81
Number of out-of-care placements.	600	668	✓✓	46, 82
Percentage (number) of child welfare interventions resolved through Alternative Dispute Resolution (ADR) processes.	30% increase over baseline or 546	657	✓✓	47, 83
Number of service delivery sites where collaborative service approaches are in place.	100	407	✓✓	48, 84
Percentage of Aboriginal children in care served by delegated Aboriginal agencies.	40%	30.7%	✗	50, 84
Percentage of Aboriginal children in care of the ministry who are being cared for by Aboriginal families.	20%	14.8%	✗	51, 85
Rate of youth in custody based on a proportion of all 12–17 year olds (per 10,000).	7.0 per 10,000	4.9 per 10,000	✓✓	53, 86

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

Goal 3: A community-based service delivery system that is effectively supported and monitored				
Performance Measure	**2004/05 Target**	**2004/05 Actual**	**Target Met?**	**Reference pages**
Number of authorities established.	Permanent authority for Community Living Services established, based on readiness	Not established	✗	56, 87
Reduce the ministry's regulatory burden by 40 per cent.	40% reduction from baseline by June 30, 2004	53%	✓✓	58, 87
Ministry rating of Enterprise-wide Risk Management implementation (based on government endorsed Risk Maturity ratings scale).	2 rating	2	✓	59, 88
Goal 4: The child care system is sustainable and meets the needs of British Columbia families				
Performance Measure	**2004/05 Target**	**2004/05 Actual**	**Target Met?**	**Reference pages**
Number of funded child care facilities.	3,700	3,870	✓✓	61, 88
Number of licensed child care spaces available for families in B.C.	76,500	N/A — data not available	N/A	62, 89
Per cent of licensed child care family facilities that are funded.	80%	N/A — data not available	N/A	63, 89
Per cent of eligible child care centre-based facilities that are funded.	65%	N/A — data not available	N/A	64, 90
Number of child care subsidies for children of eligible parents.	30,600	25,082	✗	66, 90
Implement new child care funding based on allocation of federal funding.	Implement and assess	Implemented and assessed	✓	67, 90
Child care subsidy forecasting model developed.	Complete	Completed	✓	68, 91
Evaluate the following programs: Child care operating, capital projects, Resource and Referral Centre, and child care subsidy (formerly parent subsidy).	No 2004/05 target	Evaluation frameworks completed for all four programs	N/A — no 2004/05 target	68, 91

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

Ministry Role and Services

Vision, Mission and Values

Vision

The Ministry of Children and Family Development (MCFD) envisions a province of healthy children and responsible families living in safe, caring and inclusive communities.

Mission

Our mission is to promote and develop the capacity of British Columbia families and communities to care for and protect vulnerable children and youth, and to support adults with developmental disabilities.

Values

The following principles guide the ministry in its work. We believe that:

- families have the right and primary responsibility to protect and support the growth and development of their children and youth;
- government must acknowledge and reinforce the capacity of communities to support and enhance the resilience of children and families;
- the ministry should provide the minimal intervention necessary to ensure the safety and well-being of our most vulnerable community members; and
- government must retain accountability to meet the fiscal and social policy agenda, by delivering services that are effective, efficient, and appropriate.

MCFD services should be managed and delivered to provide appropriate outcomes for children and families, at the lowest cost consistent with quality, and should focus on providing the right service at the right time in the right place.

Ministry Overview

Ministry Organization

As illustrated by the map below, the Ministry of Children and Families [MCFD] is organized into five **service delivery regions:**

1. **North**
2. **Fraser**
3. **Vancouver Coastal**
4. **Vancouver Island**
5. **Interior**

Regionally delivered services include:

- community living supports for adults with developmental disabilities and children with special needs;
- child protection; residential and foster care;
- adoption for children permanently in care;
- early childhood development, such as infant development program and supported child development services;
- therapy services; such as occupational therapy and speech-language pathology;
- child care services and supports;
- family development, such as family and community support services;
- community child and youth mental health;

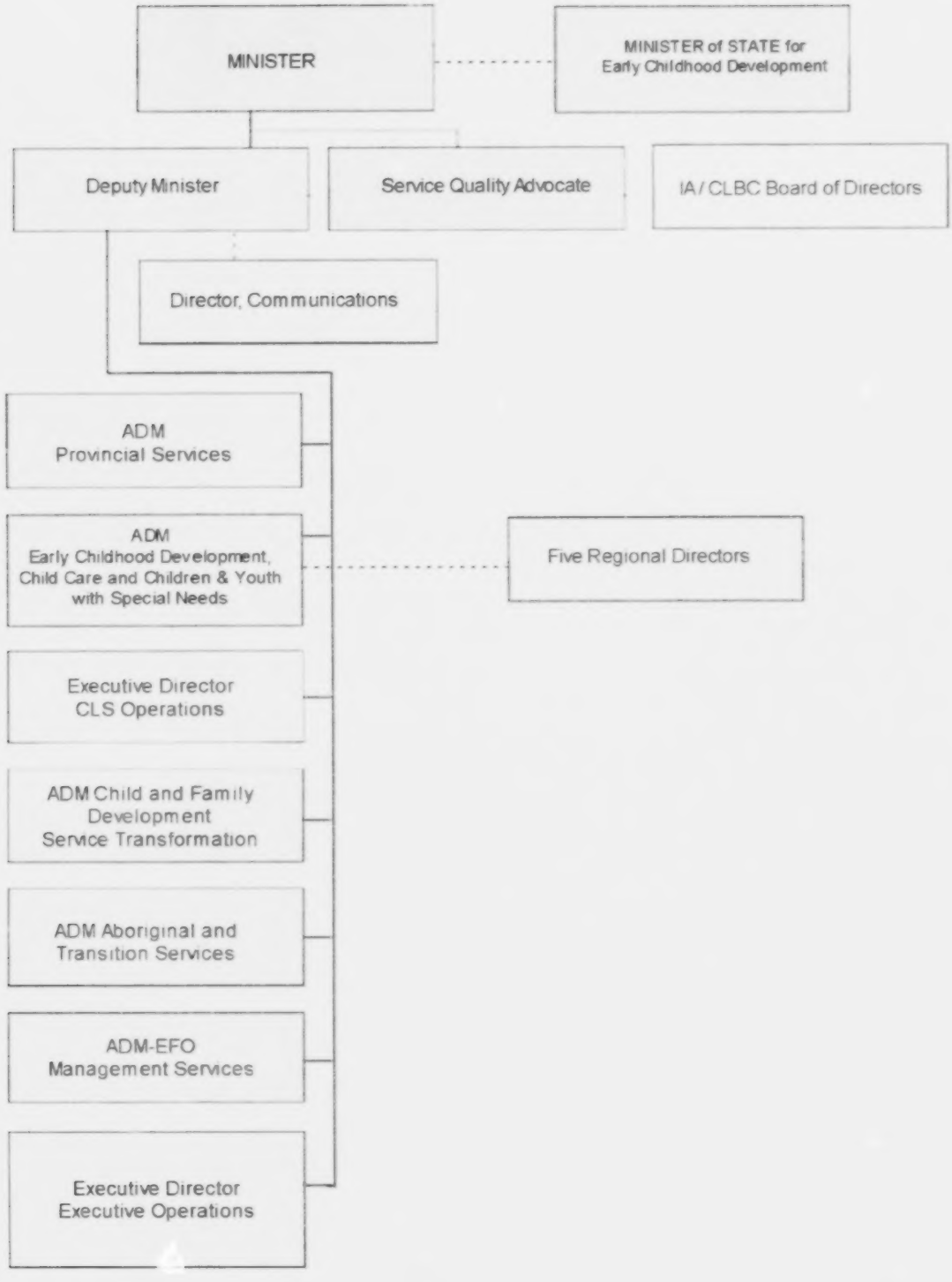
- community youth justice services; and
- programs to assist at-risk and/or commercially sexually exploited youth.

In addition, MCFD delivers specialized **provincial programs** that include overseeing the operations of the youth custody centres, youth forensic psychiatric services, Maples Adolescent Treatment Centre, nursing support services, At Home medical benefits, autism services, provincial services for the deaf and hard of hearing and migrant services.

MCFD provincial and regional offices are also responsible for delivering a variety of services to support better outcomes for children, youth and adults with developmental disabilities, and their families.

The **ministry headquarters** in Victoria is organized into seven divisions that provide the infrastructure and support the work of the MCFD service delivery regions. These divisions are:

1. Provincial Services
2. Early Childhood Development, Child Care and Children and Youth with Special Needs
3. Community Living Services
4. Child and Family Development — Service Transformation
5. Aboriginal and Transition Services
6. Management Services
7. Executive Operations


MINISTER
MINISTER of STATE for Early Childhood Development
Deputy Minister
Service Quality Advocate
IA / CLBC Board of Directors
Director, Communications
ADM Provincial Services
ADM Early Childhood Development, Child Care and Children & Youth with Special Needs
Five Regional Directors
Executive Director CLS Operations
ADM Child and Family Development Service Transformation
ADM Aboriginal and Transition Services
ADM-EFO Management Services
Executive Director Executive Operations

External Stakeholders

The ministry works with a range of stakeholders including: service provider organizations and advisory bodies; local governments; school boards; health authorities; unions; professional organizations; planning committees and umbrella organizations for service providers.

MCFD also works with other provincial government ministries and organizations including: Health Services; Education; Advanced Education; Attorney General; Community, Aboriginal and Women's Services; Finance; Human Resources; Public Safety and Solicitor General, Child and Youth Officer and Public Guardian and Trustee of British Columbia.

Legislation

Currently, the Ministry of Children and Family Development administers the following legislation:

- *Adoption Act*;
- *Child Care B.C. Act*;
- *Child Care Subsidy Act*;
- *Child, Family and Community Service Act*;
- *Community Living Authority Act*;
- *Community Services Interim Authorities Act*;
- *Correction Act* (as it pertains to young persons only);
- *Human and Social Services Delivery Improvement Act* (Part 3);
- *Human Resource Facility Act*;
- *Social Workers Act*;
- *Youth Criminal Justice Act* (Canada); and
- *Youth Justice Act*.

The following provincial and federal legislation also guides delivery of ministry services: *Community Care Facility Act*, *Family Relations Act* and *Mental Health Act*.

The new *Youth Justice Act*, which received Royal Assent on November 17, 2003, repealed the *Young Offenders (British Columbia) Act* and incorporated the provisions of the *Correction Act* pertaining to young persons, for which MCFD is responsible.

Core Business Areas

1. Community Living Services

Budget in 2004/05: $609,573,000

Expenditures: $620,395,000

Actual Full-Time Equivalency [FTEs]: 460

Community Living Services assists adults with developmental disabilities to live as fully and independently as possible in their homes and communities. Services include residential and day programs, training and support programs, and professional supports.

In addition we operate the Provincial Assessment Centre (formerly Willow Clinic), a provincial resource for mentally disabled, dually-diagnosed individuals who may present challenging psychiatric, medical, psychological or behavioural problems that significantly interfere with day-to-day functioning and care.

This core business area also includes selected services for children with special needs and their families. We help children with developmental disabilities (intellectual impairments), children with Autism Spectrum Disorder (ASD), and children who are dependent on care in daily living activities. Services[2] include:

- respite care;
- parent support;
- child and youth care workers;
- homemaker/home support;
- autism funding programs;
- nursing support services;
- professional and behavioural support services; and
- guardianship and residential services for children with special needs who are in care.

These services are delivered through MCFD regional offices and contracted service providers.

2. Child and Family Development

Budget in 2004/05: $661,722,000

Expenditures: $651,780,000

Actual Full-Time Equivalency [FTEs]: 2,650

This core business area covers a range of services for children, youth, and their families. Services include:

- child protection services;

[2] http://www.mcf.gov.bc.ca/spec_needs/supports.htm *.

* *Refer to note on page 3.*

- residential and foster care;
- adoption for children permanently in care;
- family development;
- community child and youth mental health;
- community youth justice supervision services, provided by youth probation officers;
- services to assist at-risk, high-risk and sexually exploited youth including safe houses and outreach services;
- At Home medical benefits;
- medical benefits for children in care;
- early childhood development programs such as literacy and school-based programs, parenting and family supports, infant development and Aboriginal early childhood development;
- early intervention[3] therapy services and therapies for school-aged children;
- Fetal Alcohol Spectrum Disorder (FASD) prevention and support services; and
- supported child development services (formerly supported child care).

These programs are delivered through regional ministry offices, delegated Aboriginal child welfare agencies and contracted service providers.

3. Child Care Services

Budget in 2004/05: $173,270,000

Expenditures: $173,097,000

Actual Full-Time Equivalency [FTEs]: 158

This core business area is responsible for supporting quality, sustainable child care services in B.C. communities, so that parents may choose from a range of safe and affordable options to meet their diverse needs.

The division promotes quality child care throughout the province and helps parents with its cost. We provide subsidies to make child care accessible to lower-income parents. We assist child care operators through capital and operating funds. We support child care workers and parents through training, professional development, and parent and provider referrals. Services include:

- child care subsidy program;
- child care operating fund;
- child care capital funding program;
- child care resource and referral program; and
- the early childhood educator registry.

[3] http://www.mcf.gov.bc.ca/spec_needs/eits.htm *.

* *Refer to note on page 3.*

4. Provincial Services

Budget in 2004/05: $94,028,000

Expenditures: $90,769,000

Actual Full-Time Equivalency [FTEs]: 610

This core business area is primarily responsible for the administration of specialized provincial services for children and youth, to support and complement the delivery of regionally-based community services.

Key functions performed through MCFD Victoria headquarters include: establishing policy and standards; leading provincial planning; and providing corporate and operational support for programs such as Children and Youth with Special Needs, Child and Youth Mental Health, Youth Justice, Youth Services and Safe Care.

Provincial Services also directly manages specialized programs that complement Child and Family Development services administered by the five CFD regions and by Community Living Services. In this operational capacity, the division acts as a "sixth" MCFD region. These specialized provincial services include:

- youth custody centres;
- youth forensic psychiatric services;
- Maples Adolescent Treatment Centre;
- provincial services for the deaf and hard of hearing;
- community brain injury program;
- autism services (early intensive behavioural intervention for children under age six with ASD); and
- migrant services.

5. Executive and Support Services

Budget in 2004/05: $18,110,000

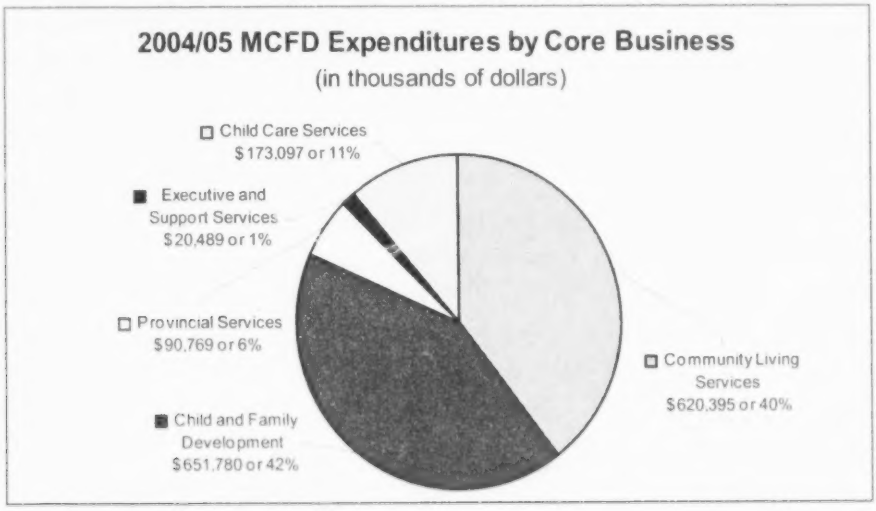
Expenditures: $20,489,000

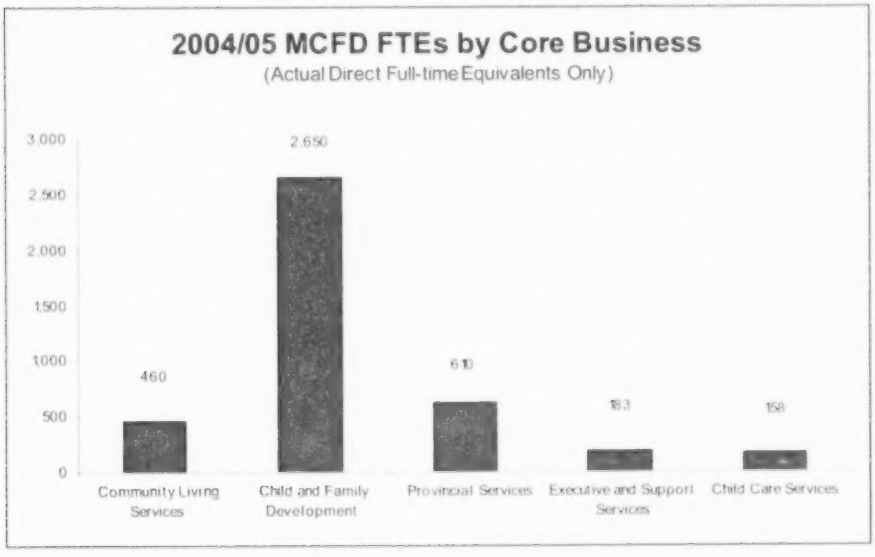
Actual Full-Time Equivalency [FTEs]: 183

This core business area provides overall advice, direction, leadership and support for ministry programs and personnel. Services include:

- litigation, legislation and deregulation;
- intergovernmental relations;
- strategic human resource services, including staff development and education;
- service planning;
- accountability and performance management;
- governance planning, including transition services;

- development, renewal and enhancement of delegation agreements and provision of quality assurance for delegated Aboriginal agencies;
- stakeholder liaison and partnerships;
- capital and administrative services;
- information systems;
- financial services and economic analysis; and
- Freedom of Information requests and records.





Organizational Changes

Since the release of the ministry's 2004/05 Service Plan in February 2004, three significant changes have been made to MCFD's core business areas:

- Responsibility for child care moved to MCFD from the Ministry of Community, Aboriginal and Women's Services in June 2004;
- Responsibility for Community*LINK* moved from MCFD to the Ministry of Education in May 2004; and
- Within MCFD headquarters, Aboriginal and Transition Services Division was formed in September 2004.

Significant Changes in Policy Direction

In 2004/05, the ministry continued to make changes that provide more flexible and effective service delivery in both Child and Family Development and Community Living Services. These ongoing changes provide more socially-inclusive arrangements, choice and flexibility in services for children with special needs, adults with developmental disabilities, and their families.

Child welfare practices also continued to change, moving away from a preference for "in care" options toward a range of family and community-based out-of-care options, while protecting the safety and well-being of vulnerable children and youth.

In the year ahead, MCFD will continue to focus ministry resources on maximizing opportunities for supporting families and individuals to help them meet their goals.

Ministry Operating Context

Changing Demographics and Service Needs

In British Columbia there are approximately 915,000 children and youth, representing about 22 per cent of the province's total population. An estimated 590,000 are children aged 0–12, including 248,000 children under age six. The child population (0–12 years) has declined by five per cent since 2001, while the population under age six has declined by six per cent over the same time frame.

The number of Aboriginal children in B.C. is decreasing at a slower rate than the population of non-Aboriginal children. As a result, the percentage of the province's child population that is Aboriginal continues to increase.

Child Care

Of the approximately 590,000 children aged 0–12 in B.C., an estimated 42 per cent (250,000 children) receive some child care services while parents are working, going to school or participating in community activities.

On average for 2004/05, approximately 25,000 spaces for children aged 0 - 12 were supported partially through child care subsidies.

Special Needs and Developmental Disabilities

In B.C. we are seeing an increase in life expectancy, a decrease in infant mortality, and a greater incidence of some disabilities, such as Autism Spectrum Disorder (ASD). These factors continue to increase the demand for life-long services delivered to adults with developmental disabilities, and to children and youth with special needs.

The number of adults with developmental disabilities using MCFD services increased by 39.5 per cent between January 1997 and March 2005. Ministry services for individuals with disabilities were used by 8,941 individuals in March 2003. This number increased to 9,277 in March 2004 and to 9,611 by March 2005.

The increase in the number of adults with developmental disabilities being served is primarily a result of youth with special needs turning nineteen, and aging parents requiring assistance with caregiving or alternate care for their adult children.

Many adults with developmental disabilities are cared for by their parents. As the parents age they sometimes need additional assistance to care for their adult children, who themselves may require more complex services.

Child Protection and Adoption

The number of children in care, which dropped from a high of 10,775 in June 2001, was stable throughout 2004/05. As of March 2005, there were only 9,071 children in care. These figures include some children and youth with special needs including some children and youth in care by parental agreement. Forty-eight per cent of all children in care were Aboriginal.

There are almost 1,700 children whose after-care plan is adoption. There were over 300 adoption placements in 2004/05. Recruiting adoption applicants continues to be a MCFD priority, particularly applicants from minority cultures.

Youth at Risk

An estimated one per cent of young people aged 16 - 18 years (about 1,700 individuals) are considered to be at high-risk and are living in situations that jeopardize their safety and well-being.

Risk factors could include sexual exploitation, misuse of alcohol and drugs, significant mental health issues, involvement in criminal activities, homelessness, and detachment from family, school and work.

Youth in Custody

Youth custody counts remained stable in 2004/05. An average of 155 youth (aged 12 - 17 years) were in custody at facilities throughout the province in 2004/05, and an average of 2,469 youth were on supervision in the community. This compares to an average of 257 youth in custody and 3,647 on community supervision in 2001/02.

In 2004/05, about 38 per cent of the total number of youth in custody were Aboriginal and 14 per cent were female.

New Era Commitments

Of the five *New Era* commitments pertaining to this ministry, we continue to work toward the following two commitments.

New Era Commitment	Progress in 2004/05
Stop the endless bureaucratic restructuring that has drained resources from child and family services.	The ministry is moving community living services to a Crown Service Delivery Agency, Community Living British Columbia (CLBC), in the Summer of 2005. This date was revised to incorporate a jointly developed comprehensive, plan to transfer responsibility. Services will first be transferred, then transformed to reflect CLBC's vision of a flexible, person-centred approach.
With the Ministry of Public Safety and Solicitor General, fight child prostitution and youth crime with specific legislation aimed at providing greater protection to children at risk, and greater parental responsibility for children who commit crimes.	Ongoing. Extensive public consultation recommended that before proceeding with the proposed Safe Care legislation, the ministry should strengthen the network of voluntary supports and services available as alternatives to, and after, discharge from Safe Care.

Report on Performance

Overview of Ministry Goals and Linkage to Government's Strategic Goals

This section reports on the progress made in reaching performance measure targets set out in the MCFD 2004/05 – 2006/07 Service Plan[4]. These performance measures were chosen because they contribute to the ministry's vision of a province of healthy children and responsible families living in safe, caring and inclusive communities. The 2004/05 – 2006/07 Service Plan lists the ministry's goals, objectives, performance measures and targets on which this annual report is based.

As shown in the table on the next page, the ministry supported two of government's goals and related objectives detailed in the 2004/05 – 2006/07 Government Annual Strategic Plan Report[5].

[4] http://www.bcbudget.gov.bc.ca/bgt2004/sp2004/cfd/default.htm *.
[5] http://www.bcbudget.gov.bc.ca/bgt2004/stplan/default.htm *.

* Refer to note on page 3.

Government Strategic Goals

A supportive social fabric.
Safe, healthy communities and a sustainable environment.

Ministry Mission

Our mission is to promote and develop the capacity of families and communities to:

- Care for and protect vulnerable children and youth; and
- Support adults with developmental disabilities.

Ministry Goals	Ministry Objectives	Performance Measures / Indicators
Goal 1: Adults with developmental disabilities and children and youth with special needs achieve their full potential, participate in, and contribute to, their communities.	Objective 1.1: Increase choice and flexibility for individuals and families. →	Satisfaction of individuals with services received. Number of adults and families of children with special needs who receive direct or individualized funding.
	Objective 1.2: Strengthen evidence-based early intervention and support strategies, to assist families in caring for children with special needs at home. →	Percentage of children (4 – 6) and youth (17 – 19) with special needs that have completed Transition Plans.
	Objective 1.3: Transform community living services to achieve a sustainable, accessible and integrated system. →	Percentage of individuals served in family model homes.
Goal 2: Children and youth are healthy and safe in their families and communities.	Objective 2.1: Increase family and community capacity to exercise responsibility and support early childhood development that is informed by current research and evidence. →	Number of new public/private partnerships to raise awareness of Fetal Alcohol Spectrum Disorder (FASD) prevention. Percentage (number) of children to age 6 on the wait list for supported child development (formerly supported child care). Number of community-based initiatives to prevent Fetal Alcohol Spectrum Disorder. Number of Aboriginal communities with early childhood development initiatives.
	Objective 2.2: Transform child welfare practice to be increasingly evidence-based, such that it promotes safety, family continuity, and permanency for children. →	Number of out-of-care placements. Percentage (number) of child welfare interventions resolved through Alternative Dispute Resolution (ADR) processes.
	Objective 2.3: A comprehensive service delivery network based on the needs of children and their families. →	Number of service delivery sites where collaborative service approaches are in place.
	Objective 2.4: Increase culturally appropriate services delivered by Aboriginal communities for their children and families. →	Percentage of Aboriginal children in care served by delegated Aboriginal agencies. Percentage of Aboriginal children in care who are being cared for by Aboriginal families.
	Objective 2.5: Increase the sustainability and responsiveness of the service delivery system to specific child and youth populations. →	Rate of youth in custody based on a proportion of all 12 – 17 year olds (per 10,000).

Government Strategic Goals

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Ministry Mission

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- Care for and protect vulnerable children and youth; and
- Support adults with developmental disabilities.

Ministry Goals	Ministry Objectives		Performance Measures / Indicators
Goal 3: A community-based service delivery system that is effectively supported and monitored.	Objective 3.1: Implement regional and provincial governance approaches that include appropriate accountability mechanisms.	→	Number of permanent authorities established.
	Objective 3.2: Support government and ministry priorities.	→	Reduce the ministry's regulatory burden by 40 per cent. Ministry rating on Enterprise-wide Risk Management on 5 point Risk Maturity Index Rating.
Goal 4: The child care system is sustainable and meets the needs of British Columbia families.	Objective 4.1: More child care spaces are available.	→	Number of funded child care providers. Number of licensed child care spaces available for families in B.C. Per cent of eligible centre-based providers that are funded. Per cent of licensed family providers that are funded.
	Objective 4.2: Low income families are better able to meet the cost of child care.	→	Number of child care subsidies for children and eligible parents.
	Objective 4.3: Government is enabled to make informed decisions on issues that affect child care services.	→	Implement new child care funding based on allocation of federal funding. Develop a subsidy forecasting model. Evaluate the following programs: Child care operating, capital projects, Resource and Referral Centre, and parent subsidy.

Goals, Objectives, Strategies and Results

In the 2004/05 – 2006/07 Service Plan, the ministry outlined three key goals expressed in terms of what it is trying to accomplish for both individuals and the service delivery system. They were:

1. Adults with developmental disabilities and children and youth with special needs achieve their full potential, participate in, and contribute to their communities;
2. Children and youth are healthy and safe in their families and communities; and
3. A community-based service delivery system that is effectively supported and monitored.

Following the transfer of child care from the Ministry of Community, Aboriginal and Women's Services (MCAWS) in June 2004, a fourth goal was added: "The child care system is sustainable and meets the needs of British Columbia families." This goal and the associated objectives, strategies and measures will be included as they were in the 2004/05 – 2006/07 MCAWS Service Plan and have been revised in the 2005/06 – 2007/08 MCFD Service Plan to better align with this ministry's mandate.

With respect to each goal, this section identifies:

- a rationale for why the ministry is working to achieve this result;
- the core business area(s) of the ministry responsible for the goal;
- objectives that reflect the major changes the ministry is trying to achieve;
- key strategies employed to achieve the objective; and
- performance measures and targets to monitor, assess and report on ministry performance.

Service plan performance measures are expected to evolve over time as the ministry's needs, resources and priorities change and as new and better performance information becomes available. Further changes to performance measures are expected as a result of consultations involved in the transition to provincial and regional governance authorities. Further information for each measure used in the 2004/05 – 2006/07 plan is included in Appendix 2.

There are a number of performance measures in the 2004/05 Service Plan Report that were not included in the 2005/06 – 2007/08 Service Plan. The ministry continues to gather, analyze, monitor and make available many of these statistics[6]; and report on service trends and outcomes associated with services provided to children and families.

Risks and Assumptions

There are a number of factors, risks and assumptions that impact the ministry's ability to meet its planned goals, objectives and performance targets. A number of the ministry's programs and services are demand-driven and are provided to meet health and safety needs, e.g., community living services, services for children with special needs or are required through legislation, e.g., child protection services, child care subsidies. Challenges for the

[6] http://www.gov.bc.ca/mcf*.

* *Refer to note on page 3.*

ministry's service delivery system include changing demographics, including those described in the ministry's operating context; meeting the expectations for services from the clients, their families and the public; and providing these services within the ministry's budget and resource allocation. Critical to the success of the ministry's service delivery improvements are the supports, collaborative partnerships and effective working relationships with our contracted service providers, community-based organizations and government partners. The successful transition to more community-based service delivery models is dependent on adequate capacity within the service delivery system.

The ministry has emphasized and applied research based approaches and practices to provide staff, service providers and community partners with the tools they need to support the planning and delivery of its services. The ministry has used a project management approach to manage the planning and delivery of its services to make the best use of available resources through enhanced training and tools and has implemented a ministry-wide risk management approach.

Goal 1: Adults with developmental disabilities and children and youth with special needs achieve their full potential, and participate in and contribute to their communities.

This goal helps guide ministry activities to facilitate greater independence and quality of life for children and youth with special needs and adults with developmental disabilities; to promote increased choice and flexibility for individuals and families; and to achieve a sustainable, accessible and integrated system. We are committed to creating opportunities for community living for people with developmental disabilities by providing services that support their everyday needs and future goals.

Core Business Area: Community Living Services (CLS)

Objective 1.1: Increase choice and flexibility for individuals and families.

Increased choice and flexibility is a guiding objective in the delivery of services for children and youth with special needs and adults with developmental disabilities. Supports for adults include a diverse range of choice in residential models or day programs, personal service planning and training and support programs. Children with special needs have access to family-centered programs that offer parents as much choice as possible in the two broad categories of support and intervention services. There is no "one size fits all" approach and the ministry is committed to ensuring that the needs of individuals, families and communities are met in the most effective and efficient manner while enhancing opportunities for greater self-determination.

Progress on this Objective

- We expanded options for families who receive Autism Spectrum Disorder (ASD) funding, through the invoice payment option or direct funding options. We served 480 families through the new invoice payment option, which sets aside funding for eligible children and allows their parents to choose the services they need while the ministry pays the service provider directly.
- We contracted with a new service provider, ACT-BC, to deliver information and support services for families of individuals with ASD. This includes maintaining qualified service providers lists, providing parent information kits and providing training for families.
- We introduced the *Community Living Authority Act* to the B.C. Legislature, which subsequently passed the new legislation in October 2004. The Act enables the creation of an independent authority — Community Living British Columbia (CLBC) — that will provide services to individuals with developmental disabilities and their families. CLBC's vision is to provide inclusive, flexible, person-centered services to people across the province.
- In 2004/05, the Ministry of Advanced Education's student loan forgiveness program was expanded to include occupational therapists, physical therapists, speech-language pathologists and audiologists. This will help address the increasing need for these professionals in rural communities and difficult-to-fill positions.

Strategies

1. Conduct regular analyses of the satisfaction of individuals with the services they receive or have received.
2. Continue to provide a broader range of options for the use of individualized/direct funding for children with Autism Spectrum Disorder.
3. Enhance access to appropriate interventions for children and youth with Autism Spectrum Disorder through inter-ministry planning and collaboration.
4. Provide a range of funding options, including individualized/direct funding, to maximize choice, innovation and shared responsibility.

Performance Measures — Objective 1.1

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Satisfaction of individuals with services received.	N/A *New Measure*	Baseline TBD by March 2004	The planned satisfaction survey was not completed.	N/A	N/A

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The client satisfaction baseline target was not established due to the cancellation of the survey for 2004/05. • Client satisfaction can be addressed more cost effectively through the ministry's accreditation program, which requires community-based service provider agencies to be accredited by a ministry-approved international accrediting organization. • Accreditation standards guide the development of an outcome measurement system that collects feedback and evaluates satisfaction of persons served, the family of persons served and the stakeholders. • The outcome measurement system ensures that planning decisions are made based on evidence of client satisfaction, efficiency, effectiveness and access. • All funded agencies that receive $500,000 in annual ministry funding are required to be accredited by September 2006. By March 31, 2005, 94 agencies out of 232 were accredited.
What was measured?	• Not applicable as the survey was not completed in lieu of more efficient quality assurance methods.
Changes to this measure in the 2005/06–2007/08 Service Plan.	• This measure has been excluded from the 2005/06–2007/08 Service Plan. • The ministry will continue to monitor satisfaction through a variety of methods, including the accreditation program.

Performance Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of adults and families of children with special needs who receive direct or individualized funding.	Baseline 3,150 *New Measure*	4,200	5,425	1,225 families or 29.0%	✓✓

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• Target was exceeded by 1,225 families or 29.0 per cent.
What was measured?	• Number of families of children with special needs who receive direct or individualized funding (Autism Funding: Under Age Six, Autism Funding: Ages 6–18, At Home Respite and Supported Child Development). Funding is provided directly to families of children with special needs to purchase intervention or support services. • The numbers reported here only include children due to the deferral of the adult CLS individualized funding project.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure has not been included in the 2005/06 – 2007/08 Service Plan but will continue to be monitored internally. • Ongoing data regarding the number of families of children with special needs who receive direct or individualized funding will be available online in Fall 2005. • Responsibility for reporting on services to adults with developmental disabilities will transfer to CLBC during 2005/2006.

Objective 1.2: Strengthen evidence-based early intervention and support strategies, to assist families in caring for children with special needs at home.

Achieving the above objective requires improving transition planning at key developmental milestones; providing evidence-based services; and facilitating access to related information to reduce the number of children with special needs coming into the ministry's care. Children with special needs flourish best in safe and loving homes, cared for by their families, with support from MCFD as appropriate.

Progress on this Objective

- MCFD developed planning toolkits and frameworks to improve supports for children and youth with special needs. These will facilitate a smoother transition as children and youth reach key developmental milestones.
- To explain choices for families, we published a revised "Autism Funding: Policies and Procedures Manual" and the accompanying "A Parent Handbook: Your Guide to Autism Funding Programs". A toll-free ASD information telephone line[7] also helps families receive up-to-date information on Autism funding programs.
- We supported several research projects to increase the knowledge base on the effectiveness of ASD intervention strategies and program delivery models. One of these projects jointly-funded with the Ministry of Health Services and the Ministry of Education, included 100 children from B.C. in a five-year national longitudinal study of 500 children with ASD across Canada.
- The Canada Northwest Fetal Alcohol Spectrum Disorder (FASD) Partnership launched the FASD Research Network to address high-priority FASD research questions and develop better prevention and support strategies.
- Cross-ministry planning is underway for the implementation of new intervention and support services for children with developmental behavioural conditions including Fetal Alcohol Spectrum Disorder.

Strategies

1. Improve transition planning at key developmental milestones.
2. Provide evidence-based services and improve access to information about these services, to prevent children and youth with special needs from coming into care.

[7] 1-877-777-3530.

Performance Measure — Objective 1.2

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Percentage of children (aged 4–6) and youth (aged 17–19) with special needs that have completed transition plans.	25% *New Measure*	50%	The planned survey was not completed.	N/A	N/A

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The ministry was unable to measure this target as it was intended to be measured through a question added to the cancelled client satisfaction survey. • Transition planning remains a priority. In 2004/05, the ministry developed transition planning support guides[1] for distribution across the province. 5,000 copies were provided to youth, families and other community members.
What was measured?	• The ministry intended to measure the percentage of children with special needs aged 4–6 and youth with special needs aged 17–19 with completed transition plans. • These two age groups represent two key developmental milestones — transitioning from kindergarten to elementary school and graduating from high school.
Changes to this measure in the 2005/06–2007/08 Service Plan.	• This measure has been excluded from the 2005/06–2007/08 Service Plan. • A new measure: *Number of children under six with special needs receiving an early intervention therapy within three months of service request* has been added. The new performance measure reflects the ministry's increased focus on early childhood development for children with special needs.

[1] www.mcf.gov.bc.ca/spec_needs/whats_new.htm*.

Objective 1.3: Transform community living services to achieve a sustainable, accessible and integrated system.

Community Living Services provides a range of flexible services to assist adults with developmental disabilities to live as independently and fully as possible within their homes and communities. Some may require ongoing support to enable them to participate fully in the activities of daily living.

* *Refer to note on page 3.*

Following consultation with more than 2,000 affected people and organizations, service delivery authority will be transferred to a community governance body — Community Living B.C. (CLBC). This will support greater flexibility and efficiency in meeting the diverse needs of the people in the communities where they live.

Progress on this Objective

- To find an appropriate match between an individual's assessed need and the types of services provided in the community, we established Regional Service Access Committees. They examine all available options on intakes and referrals for Community Living Services (CLS).
- We initiated orientation and case consultation training with CLS staff to promote implementation of a person-centered and client-driven approach to service delivery.
- We reduced the average unit-cost for CLS residential services.
- We improved management of information and reporting systems, to better understand what services are delivered to whom and at what cost, to assist in better utilization of resources and to support evidence-based decision making.
- We supported the Community Living Restructuring Fund, a fund dedicated to assist families and service providers develop sustainable plans for persons with developmental disabilities, through a grant to the Victoria Foundation.

Strategies

1. Support Community Living British Columbia's efforts to strengthen partnerships within the community living sector through:
   - joint planning on service transformation;
   - creating opportunities to increase collaboration between non-profit and private service providers; and
   - supporting efforts to generate efficiencies through sharing of fiscal, physical and human resources.
2. In partnership with individuals and families, provide more flexibility, choice, and shared responsibility with respect to services and supports.
3. Support the increased use of informal, unfunded community supports and partnerships to reduce reliance on formal, funded resources.

Performance Measure — Objective 1.3

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Percentage of individuals served in family model homes.	Baseline 34.4%[1] *New Measure*	40%	36.0%	4%	✗

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• We did not meet our stated target. • Rather than change the circumstances of individuals who had lived in the same group home for many years, the ministry's focus was on placing new admissions into family model homes and semi-independent living placements, when appropriate. As new admissions form only a small percentage of overall provincial residential occupancy, it will take a number of years to change overall occupancy proportions. • Using the more accurate 2004/2005 methodology the November 2003 baseline should be stated as 34.4 per cent versus the 36.4 per cent that was originally reported. Taking into account the baseline adjustment, the number of adults served in family model homes was increased by 1.6 per cent during 2004/2005, and demonstrates improved performance in this area.
What was measured?	• Percentage of total adult CLS individuals receiving residential services that are served in a family model home compared to adults served in staffed residential facilities.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure has been restated as *per cent of new adult admissions referred to family model homes and semi-independent living rather than staffed residential resources.* The revised measure focuses on new admissions into staffed residential resources rather than overall occupancy proportions. This measure more accurately illustrates the emphasis on matching individuals' assessed need with type of resource.

[1] Baseline restated based on data revisions.

Goal 2: Children and youth are healthy and safe in their families and communities.

Research and experience have confirmed that a secure and caring home with strong family and community ties is the ideal environment to raise strong and confident children and youth. Although families are primarily responsible for providing this environment, MCFD services aim to enhance the resilience of children, youth, and families in their communities. Working together, we strengthen our collective capacities to achieve positive outcomes.

The ministry continues to focus on ensuring the safety and well-being of children and youth in British Columbia. MCFD has services to help families and communities identify and support children who are born with special needs, such as Fetal Alcohol Spectrum Disorder (FASD) or Autism Spectrum Disorder (ASD), or who are born at risk for developmental delays.

Child protection and family support services are in place for those children and youth who are experiencing abuse and neglect.

Those children and youth who are experiencing mental health problems, sexual exploitation or involvement in violent crime are supported by child and youth mental health services, youth services and the youth justice system. Here too, we believe that the most effective interventions are those that involve the families of the children and youth and that reflect the best available evidence.

Core Business Areas: Child and Family Development
Provincial Services

Objective 2.1: Increase family and community capacity to exercise responsibility and support early childhood development that is informed by current research and evidence.

It is especially important during the first six years of life that children receive the care and stimulation required to meet their developmental needs. We are broadening community resources and capacity to encourage early childhood development. We are developing specialized approaches for Aboriginal communities, and working with all B.C. communities to improve services and access to services for children with special needs. The ministry engages in community-based strategies to prevent FASD and to assist those living with FASD.

Progress on this Objective

- With community partners (United Way and credit unions), we established 18 "Success by 6®" initiatives reaching 110 B.C. communities. These initiatives increase awareness of early childhood development and engage communities in planning for services.
- Through the Human Early Learning Partnership (HELP), university, government and community partners focused on early childhood development. Research was conducted to assess the readiness-to-learn of 95 per cent of kindergarten children in B.C. We are the only province in Canada to complete a baseline of school-readiness.

- FASD awareness material was developed for youth, sex trade workers, and tavern owners and their patrons. The material focuses on the risks of drinking alcohol during pregnancy and lists the provincial public resources available. Ministry FASD funding also supported high-risk pregnancy outreach programs in isolated areas of the province.
- We joined with the Ministry of Community, Aboriginal and Women's Services, the B.C. Libraries Association, "Raise-a-Reader" program and Vancouver Public Library to develop the "Books for Babies" initiative. This initiative encourages parents to read to their children from infancy onward and to connect with the resources and services available at public libraries. Early and sustained exposure to books and reading materials is linked to successful development of literacy skills, while the parental connection to community resources is linked to healthy family functioning.
- We expanded "Roots of Empathy", a classroom-based program for four to 14 year olds, which brings community and family into schools to participate in activities that promote emotional literacy. This helps reduce childhood aggression, bullying and violence in schools and communities. The program is being expanded into as many B.C. kindergarten classrooms as possible. A pre-school program — "Seeds of Empathy" — will be piloted during 2005/06 in one Aboriginal setting and one other child care setting in each MCFD region.

Strategies

1. Promote community-based prevention and intervention strategies regarding the risks of alcohol consumption during pregnancy to prevent Fetal Alcohol Spectrum Disorder (FASD) and to promote innovative approaches that help communities support individuals and families living with FASD.
2. Develop a prevention-focused, community-based, integrated service delivery system for young children and their families that improves outcomes and strengthens partnerships with the private/non-profit and community sectors to broaden community involvement and to maximize existing community resources and capacity for early childhood development.
3. Support Aboriginal communities to develop and implement early childhood development strategies to meet their needs.
4. Refocus supports for children with special needs in child care and community settings to be more integrated and flexible in response to parent needs and work to eliminate the wait lists for supported child development services (formerly supported child care) for children up to six years of age.

Performance Measures — Objective 2.1

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of new public/private partnerships to raise awareness and commitment to Fetal Alcohol Spectrum Disorder (FASD) prevention.	*New measure*	1	4	3	✓✓

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	

Performance Analysis.	• The ministry has exceeded the target.
	• The new public/private provincial partnerships are with:
	  • Brewers Canada for the webcasting of the Fetal Alcohol Canadian Expertise (FACE) Roundtable;
	  • The Prostitute Empowerment Education and Resource Society (PEERS) to support the community-based work of PEERS and the development of prevention material directed at high-risk women;
	  • The Special Needs Adoption Parents Society for the development and printing of targeted public awareness material; and
	  • The Carol Legge Endowment Fund as part of the ECD Legacy Fund housed in the Vancouver Foundation.

What was measured?	• The total number of new public/private partnerships to raise awareness of and commitment to FASD prevention.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure has not been included in the 2005/06 – 2007/08 Service Plan. Progress regarding FASD prevention will be reported in the Early Childhood Development Annual Report.

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Percentage (number) of children up to age six on the wait list for supported child development (formerly supported child care) [1]	613 children on the waitlist [2]	70% of the baseline or 429 children on the waitlist	618 children on the waitlist	189	✗

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE

Performance Analysis.	• The ministry did not meet the target. • In 2004/05, there was a substantial increase in demand for services as a result of increased funding in 2003/04, raised awareness regarding access to service and outreach into Aboriginal communities not previously served. • In addition, the ministry included Aboriginal children not previously identified who require SCD services. • In 2003/04 2,384 services were provided and in 2004/05 2,922 services were provided, an increase of 538 services or 23 per cent. This includes children under age six receiving services for the first time, less children ageing out of this age category.
What was measured?	• The total number of children under age six on the waitlist as of October 31.
Changes to this measure in the 2005/06–2007/08 Service Plan.	• This measure was restated as *Number of children with special needs and their families who receive Supported Child Development services* in the 2005/06–2007/08 Service Plan. • Annual Supported Child Development Survey data is available online by Fall 2005 at http://www.scdp.bc.ca *.

[1] Numbers for this measure are a snapshot of October 31 of the respective year.

[2] This performance measure target has been restated for clarity. The correct target is "70% of the baseline, or 429 children on the waitlist".

* *Refer to note on page 3.*

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of community-based initiatives to prevent Fetal Alcohol Spectrum Disorder (FASD).	*New Measure* Baseline 3	4	5	1	✓✓

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The ministry has exceeded the target.
What was measured?	• The number of community-based initiatives that focus on raising awareness of and preventing FASD.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure was excluded from the 2005/06 – 2007/08 Service Plan but will continue to be monitored internally.

Performance Measure	Year	Target	Actual	Variance	Target Met?
Number of Aboriginal communities with early childhood development (ECD) initiatives.	2004/05	35	41	6 over target	✓✓
	2003/04		37[1]		
	2002/03		29		
	2001/02		25		

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The stated target has been exceeded by six Aboriginal communities with early childhood development initiatives. Existing Aboriginal ECD initiatives were able to expand services to additional communities. • Target was set prior to completion of data reporting for previous year.
What was measured?	• The total number of Aboriginal communities with ECD initiatives (cumulative).
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure was replaced with a revised measure: *number of Aboriginal initiatives that enhance early childhood development services for young Aboriginal children and their families*, to clarify the emphasis on the number of initiatives rather than the number of communities. • This new measure includes the number of Aboriginal community-based early childhood development initiatives as well as Aboriginal Infant Development, Aboriginal Building Blocks and Aboriginal Family Resource programs.

[1] Restated based on data revisions.

Objective 2.2: Transform child welfare practice to be increasingly evidence-based, such that it promotes safety, family continuity and permanence for children.

Safety, family continuity and permanence for children are integrally linked to MCFD's child welfare mandate and our commitment to sound and effective policy and practice. Families are primarily responsible for ensuring the safety and well-being of children. However when children are in an unsafe environment, intervention and support may be necessary to ensure safety, while also seeking to respect continuity of care for the child and the responsibility of the family and community in the child's life.

The response involves many efforts as appropriate to the individual situation, which may include considering community-based alternatives to court decisions, and supporting extended family members as care givers. The ministry strives to deliver services according to leading evidence-based research, in a manner that promotes safety, continuity and permanence for children.

The Family Development Response (FDR) is an alternative to child protection investigations. It focuses on parental involvement, assessing a family's strengths and risks, and providing services as required by the child and family. These may include parenting programs, anger management, counselling, mental health and other services. Alternative Dispute Resolution (ADR) provides other options for resolving family differences instead of going through the court system. Examples include family group conferencing and mediation. FDR and ADR mechanisms generally result in better outcomes for children and families, lower costs to the service delivery system and fewer children being taken into the care of the ministry.

Progress on this Objective

- 310 family group conferences and 347 mediation sessions were held across the province in 2004/05, increasing from 199 family group conferences and 221 mediation sessions in 2003/04.
- MCFD conducted extensive discussions and consultations with ministry staff and service providers on these new directions in child welfare practices.
- MCFD delivered a two-day Permanence Planning Conference with team leaders, supervisors, community service managers, guardianship workers, Aboriginal agencies and stakeholders to support permanence planning for children in care.
- The ministry enhanced collaboration among persons delegated to provide services when case files are transferred between regions. This was done by implementing a new case transfer protocol that promotes continuity of integrated services to children and families.
- We further developed ADR programs focusing on Aboriginal families. To promote ADR through education and training we established an ADR Education Working Group with members from all regions, MCFD headquarters and the Ministry of the Attorney General.

- We implemented or began implementation of the Family Development Response (FDR) in all regions. Vancouver Coastal region, which had the earliest implementation, provided FDR to more than 300 families. Preliminary assessment of the impact of FDR in Vancouver Coastal suggests positive outcomes for the children and families, and all regions have now implemented FDR approaches.
- MCFD redesigned family development and youth services to establish more well-defined networks of effective and culturally-appropriate services, focusing on evidence-based programs, to ensure that families, children and youth have direct access to services in their community.
- In partnership with the Adoptive Families Association and community agencies, we launched the "ACT Now" (Adults Connecting with Teens) advertising campaign to promote adoption of older youth in care.
- We partnered with the B.C. Federation of Foster Parent Associations, the Adoptive Families Association of B.C. and the Federation of Aboriginal Foster Parents to launch a new online resource database[5] for B.C. families. This website gives people direct and immediate access to information regarding support services available throughout British Columbia.

Strategies

1. Transform government's response to child welfare concerns, through approaches that build on family strengths and maintain family continuity (to keep children and youth safe within their families and communities).
2. Reshape case planning to rely less on the court system as a decision-maker and more on community-based Alternative Dispute Resolution processes.
3. Transform planning for children in care to focus more on developing and maintaining family stability and life-long relationships (to better maintain permanence).

[5] http://www.inyourgrasp.bc.ca*.

* *Refer to note on page 3.*

Performance Measures — Objective 2.2

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of out-of-care placements.	Baseline 400 *New Measure* Revised Baseline 613[1]	600	668	68	✓✓

✓✓: Target exceeded; ✓: Target met; ✖: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The target was exceeded by 68 children. • The number of out-of-care placements continues to grow.
What was measured?	• The count of the number of new out-of-care placements managed in MCFD regions that occurred during the fiscal year. • "Out-of-care placements" include kith and kin agreements entered into in accordance with section 8 of the *Child, Family and Community Service Act*, and orders granting custody to others, under the supervision of the Director, made under sections 35 (2) (d) and 41 (1) (b).
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure was restated for clarity: *Number of children placed with extended family or in community as an alternative to coming into care.*

[1] The data collection methodology was refined and the new baseline reflects the improved methodology.

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Percentage (number)[1] of child welfare interventions that are resolved through alternative dispute resolution processes (ADR).	420	30% increase over baseline[2] or 546	657	111	✓✓
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• The ministry exceeded the target.				
What was measured?	• Activities designed to resolve disagreements between families and the ministry regarding decisions in a child welfare intervention, without using the court system. This includes mediation and family group conferencing.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure was excluded from the 2005/06 – 2007/08 Service Plan, but will continue to be monitored internally.				

[1] "number" added to clarify interpretation of the data.

[2] "increase over baseline" added to clarify interpretation of the data.

Objective 2.3: A comprehensive service delivery network based on the needs of children and their families.

A comprehensive service delivery network should be based on children and youth directly accessing culturally-appropriate services in their community. These services should be evidence-based. This objective is best accomplished by partnering with other ministries, government agencies and service providers on collaborative initiatives.

Progress on this Objective

- Improved partnerships in communities, with more than 400 collaborative service approaches and sites across the province, bringing MCFD and community partners and agencies together to work toward a shared purposed or objective.
- We partnered with the National Center on Shaken Baby Syndrome and the Children's and Women's Hospital of B.C. to hold an interdisciplinary conference on Shaken Baby Syndrome with more than 240 participants in health and social services.
- In addition to the collaborative service sites, some MCFD Family Development Response staff are working out of neighborhood houses and community agencies. FDR involves community collaboration with a variety of partners, which may include extended families, schools, aboriginal communities, specialists in domestic violence, parenting programs, mental health services, and various other community agencies.

Strategies

1. Redesign services to ensure that families, children and youth have direct access to services in their community, from a well-defined network of effective and culturally appropriate services that focus on evidence-based programming.
2. Create partnerships involving other ministries, service providers, informal supports and ministry staff throughout the province, through collaborative service initiatives.
3. Reinvest savings into direct family development and youth services, with priority given to Aboriginal services.

Performance Measure — Objective 2.3

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of service delivery sites where collaborative service approaches are in place.	*New Measure*	100	407	307	✓✓
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• The target was exceeded by 307 sites. • Collaborative service approaches include co-location of ministry services with contracted service provider organizations, health authorities, school districts and/or other government ministries and agencies to achieve shared goals. • As these are manual counts from various sources, performance results should be read with caution.				
What was measured?	• The total number of service delivery sites where collaborative approaches are in place.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure is excluded from the 2005/06 – 2007/08 Service Plan due to data collection limitations and will continue to be monitored internally.				

Objective 2.4: Increase culturally appropriate services delivered by Aboriginal communities for their children and families.

The ministry believes that services to Aboriginal children, families and communities should be provided in ways that are culturally appropriate. Through partnerships with Aboriginal communities, the ministry seeks to provide services that promote strong family and community ties and support systems. MCFD collaborates with other ministries, Aboriginal people and the Government of Canada to improve the socio-economic well-being of Aboriginal children, families and communities in B.C.

When there is concern regarding the safety or well-being of a child, efforts are made to consult with that child's Aboriginal community over the best course of action to keep that child safe within the community. When it is not possible for the child to remain within the community, attempts are made to place the child in care with another Aboriginal family or Aboriginal agency, to provide cultural continuity.

Progress on this Objective

- MCFD completed the first cultural awareness/competencies training related to Aboriginal culture and practices. This training was for therapists in Aboriginal and non-Aboriginal infant development, supported child development (SCD) and early interventions.
- A number of Aboriginal SCD initiatives are being developed to improve outreach into Aboriginal communities and to increase the number of Aboriginal children with special needs participating in SCD and other early childhood development programs.
- We continued the "A Child's Roots are Forever" project, which is designed to assess the plans of all Aboriginal children in care. The program is intended to reconnect children with their culture and heritage in meaningful ways.
- Over 50 per cent of Aboriginal children placed for adoption were placed in Aboriginal homes.
- The ministry completed the reinvestment of $5.5 million saved through the redesign of family development and youth services into services delivered by delegated Aboriginal agencies.
- We developed, renewed and expanded delegation agreements with Aboriginal child welfare agencies, increasing the capacity of Aboriginal communities to deliver services and making the service delivery system more responsive to Aboriginal cultural needs.
- In 2004/05, MCFD created 170 new licensed child care spaces through six major child care capital projects totaling over $1.2 million. These projects were completed or in progress in First Nations communities during the fiscal year.
- The ministry supported enhancements to 667 existing licensed child care spaces through 28 minor capital projects for emergency repair, replacement and relocation. These were completed or were in progress during 2004/05 to support First Nations organizations in meeting health and safety standards.
- Currently, 21 Aboriginal agencies in B.C. have a delegation agreement in place to provide child welfare services. Other initiatives are also underway to increase the cultural appropriateness of services.
- We have continued to establish dedicated Aboriginal service teams within the ministry. One of these teams is co-located with a delegated Aboriginal agency.

Strategies

1. Implement initiatives to increase the role of the Aboriginal community in addressing identified risks to a child, in ways that keep children within their family and community.
2. Promote the development of supports and services for children and families within Aboriginal communities through enhanced partnerships with Aboriginal communities.

3. Implement initiatives to increase the percentage of Aboriginal children in care who are served by a delegated Aboriginal agency or are in the care of an Aboriginal family.
4. Engage with other B.C. ministries as well as federal and local governments in initiatives to improve the socio-economic well-being of Aboriginal children and families.

Performance Measures — Objective 2.4

Performance Measure	Year	Target	Actual	Variance	Target Met?
Percentage of Aboriginal children in care served by delegated Aboriginal agencies.[1]	2004/05	40%	30.7%	(9.3%)	✗
	2003/04		29.3%		
	2002/03		23.6%		
	2001/02		14.4%		
	2000/01		12.8%		

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The target has not been achieved. The ministry remains committed to developing, expanding and renewing delegation enabling agreements so that Aboriginal children receive culturally appropriate services. • It had been anticipated that more of the 21 delegated Aboriginal agencies would be providing a full range of services (currently 7) and that more than one new delegation agreement would be signed in 2004/05. As this did not occur, MCFD was not able to transfer as many children and there were fewer agencies that could provide a full range of services. • As of March 31, 2005, 1,349 (30.7 per cent) of the 4,393 Aboriginal children in care were served by delegated Aboriginal agencies.
What was measured?	• The total number of Aboriginal children in care served by delegated Aboriginal agencies as a percentage of the total number of Aboriginal children in care (i.e., receiving services from either the ministry or Aboriginal agencies).
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure continues in the 2005/06 – 2007/08 Service Plan.

[1] Actual percentages are as of March 31 in the respective year.

Performance Measure	Year	Target	Actual	Variance	Target Met?
Percentage of Aboriginal children in care of the ministry[1] who are being cared for by Aboriginal families.	2004/05	20%	14.8%	(5.2%)	✗
	2003/04		15.6%		
	2002/03		15.3%		
	2001/02		13.9%		
	2000/01		13.0%		

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE

Performance Analysis.	• The target was not achieved. • The percentage cited does not include those Aboriginal children placed in Aboriginal adoptive homes which increased from 25 per cent in 2003/04 to 50 per cent in 2004/05. • The overall percentage of Aboriginal children in the care of the ministry who are placed in Aboriginal foster homes has decreased in 2004/05 partly due to an increase in the number of children residing in Aboriginal foster homes that were transferred to delegated agencies. • The ministry remains committed to improving performance on this indicator and keeping Aboriginal children within their families and communities. Efforts are underway to recruit more Aboriginal foster homes.
What was measured?	• The total number of Aboriginal children in care who reside in Aboriginal foster homes, group homes, and specialized resources as a percentage of all Aboriginal children in the care of the ministry.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan this measure will include Aboriginal children in care served by delegated agencies, Aboriginal children in out-of-care options and Aboriginal children placed for adoption in Aboriginal adoptive homes.

[1] "Of the ministry" added to measure for clarity.

Objective 2.5: Increase the sustainability and responsiveness of the service delivery system to specific child and youth populations.

Children and youth who suffer from mental health disorders and those considered to be at high-risk will benefit from a sustainable and responsive service delivery system. The effectiveness of the system can be increased by developing strategies to improve the quality and increase the availability of mental health services; by improving rehabilitation services for youth in the justice system; and by providing safe care services for sexually exploited youth.

Progress on this Objective

- MCFD continued province-wide evidence-based Child and Youth Mental Health training. Twenty-eight training sessions were held in 2004/05, involving more than 1,000 participant clinicians and clinical supervisors.
- We implemented the "FRIENDS" pilot program, to educate Grade 4 and 5 students about the intervention and prevention of anxiety disorders. In partnership with the Ministry of Education and 35 school districts, over 22,000 students received the pilot program. Work continues to fully implement "FRIENDS" on a province-wide basis.
- We conducted public consultation on Safe Care legislation and services. Before proceeding with the proposed legislation, we are following up on recommendations to strengthen the network of voluntary services and supports available as alternatives to, and after, discharge from Safe Care.
- The ministry initiated regional planning processes for individualized "wraparound" services for sexually exploited youth. "Wraparound" services are delivered through a process of integrated, multi-disciplinary, collaborative work by service providers. Building on the strengths of children, youth and their families, the wrap-around process turns a group of services into an efficient system of care.
- MCFD worked with the Premier's Task Force on Homelessness, Mental Illness and Addictions to develop plans for additional shelter, safe housing and youth transitional housing. We completed a "Review of Youth Emergency Shelters and Safe Houses in B.C.". This review identified best practices and challenges related to the provision of short-term emergency accommodation and care for youth who need a safe place to stay, as well as support to plan positive changes in their lives.
- The ministry partnered with the Knowledge Network and the Mental Health Evaluation and Community Consultation Unit (MHECCU) at the University of British Columbia to produce three unique documentaries on child and youth mental health. "Beyond the Blues: Child and Youth Depression," "Fighting Their Fears: Child and Youth Anxiety," and "Map of Mind Fields: Managing Adolescent Psychosis" helped to inform B.C. families about symptoms of and treatment for these disorders.
- We developed nine regional Child and Youth Mental Health demonstration projects that focus on innovative approaches to child and youth mental health service delivery in British Columbia.
- We enhanced the community-based Intensive Support and Supervision program that provides one-to-one support and supervision in the community for youth in conflict with the law.
- We increased community-based services to help individuals reintegrate into the community upon their release from a youth custody centre.

Strategies

1. Increase the availability and quality of mental health services by implementing the multi-year Child and Youth Mental Health Plan that includes:
   - building community and family capacity;
   - improving and increasing treatment and support;
   - reducing risk by preventing and reducing the effects of mental health disorders; and
   - improving performance through greater accountability and outcome monitoring.
2. Minimize youth involvement in the criminal justice system by providing treatment services and community-based alternatives to custody to assist in the rehabilitation of youth within the justice system.
3. Develop and implement safe care services for sexually-exploited youth.

Performance Measure — Objective 2.5

Performance Measure	Year	Target	Actual	Variance	Target Met?
Rate of youth in custody based on a proportion of all 12 – 17 year olds (per 10,000).	2004/05	7 per 10,000 or lower	4.9 per 10,000	(2.1)	✓✓
	2003/04		4.7 per 10,000		
	2002/03		6.7 per 10,000		
	2001/02		7.9 per 10,000		
	2000/01		9.1 per 10,000		

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The target has been exceeded. • Due to the declining rate of youth in custody, capacity has been reduced in the three remaining custody facilities. • No further capacity reduction planned due to the need for provincial distribution of custody facilities and the cyclical nature of custody rates.
What was measured?	• Average annual (daily) population in Youth Custody per 10,000 children and youth age 12 – 17 years as a proportion of all 12 – 17 year olds.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• No changes were made to this measure in the 2005/06 – 2007/08 Service Plan.

Goal 3: A community-based service delivery system that is effectively supported and monitored.

Adults with developmental disabilities, children, youth and their families are best supported in the context of a community-based service delivery system. The ministry remains committed to alternative governance approaches that will bring decisions about services closer to the communities using those services, to better meet their needs.

Community Living B.C. (CLBC) will be the authority established to plan and deliver services for individuals with developmental disabilities and some children with special needs. The ministry continues to build partnerships with the Interim Authority of Community Living B.C. (IA/CLBC), Regional Aboriginal Planning Committees, B.C. communities and service providers to ensure there is a smooth transition to community governance.

The demand for MCFD services is increasing while fiscal realities limit the budget available. To meet this challenge, our goal is to create a sustainable system that is accountable to those who require services and to the broader public who fund those services.

Core Business Area: Executive and Support Services

Objective 3.1: Implement regional and provincial governance approaches that include appropriate accountability mechanisms.

Appropriate accountability mechanisms ensure the effective and efficient delivery of services. The regional and provincial governance approaches that are being adopted in B.C. reflect the ministry's priority to clearly define roles, reporting relationships and accountabilities. While responsibilities are being transferred to the new community living authority, we are conducting extensive planning to ensure a smooth transition. This includes preparing ministry staff, the interim authority board and regional transition councils for their proposed new roles and responsibilities.

Progress on this Objective

- The ministry developed and confirmed Community Living B.C.'s structure and service delivery approach, reflecting the importance of a unified organization that clearly defines roles, reporting relationships and accountabilities.
- MCFD endorsed in principle a Joint Multi-Year Plan that outlines the necessary elements, activities, timelines and commitments required to achieve Aboriginal governance of child and family services. This plan involves the ministry, the Joint Aboriginal Management Committee (JAMC), the Aboriginal Chairs Caucus (ACC) and the Regional Aboriginal Planning Committees. It encompasses all resources and services currently provided by the ministry and builds on previous steps taken to recognize Aboriginal jurisdiction over child and family services.

- By March 31, 2005, 94 community-based agencies funded by MCFD became accredited and more agencies are in the process of accreditation.
- The MCFD/CLBC Children's Agreement project has produced, for the first time, an up-to-date profile of the individual children and youth served by Community Living Services (CLS). This information will assist in planning for the transfer of responsibility for some services for children and youth with special needs to CLBC.

Strategies

1. Implement a comprehensive plan to ensure a smooth and orderly transition to new authorities, including establishing a Governance Management Team that will build key relationships and a co-ordination capacity.
2. Enable and support ministry staff, interim authority boards and regional transition councils to prepare for readiness to effectively fulfill their proposed new roles and responsibilities.
3. Develop and implement an accountability framework for the authorities.

Performance Measure — Objective 3.1

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of authorities established.	Interim authority for Community Living Services established	Permanent authority for Community Living Services established, based on readiness	Not established	Delayed to Summer 2005	✗

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The target was not achieved. • An independent review (Boyd report) was done in Spring 2004 to assess the readiness to transfer CLS services to the permanent authority. The report recommended delaying the creation of the authority from the originally proposed date of 2004. The expected date for establishment of a permanent authority for Community Living Services has been moved to Summer 2005. • Work continued throughout the 2004/05 year to ensure a smooth transition for service recipients, their families and staff. • Enabling legislation was passed in October 2004. The Board members for the IA/CLBC were appointed and the Interim CEO was chosen.
What was measured?	• Whether the authority for CLS was established.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure has been split into two measures in order to separate the establishment of regional child and family authorities from the establishment of the community living services authority. The measure related to community living services has been restated as: *an authority established under legislation assumes responsibility for the delivery of some or all community living services* and the measure related to regional and family authorities has been restated as: *creation of regional authorities to oversee delivery of child and family services.*

Objective 3.2: Support government and ministry priorities.

To support ministry priorities, the ministry's 2004/05 – 2006/07 Service Plan focused on budget stabilization, service transformation and transition to new governance. The integration of financial data with human resource, contract, program and service data is a key objective in meeting these priorities. Progress toward allowing the public, government and service providers easier and more streamlined access to services and information is progressing as planned.

Progress on this Objective

- MCFD completed the deregulation project. We reduced the ministry's regulatory burden by 53 per cent between June 1, 2001 and June 30, 2004, from the baseline of 16,963 regulatory requirements down to under 8,000.
- We greatly improved communications for staff and service providers. Initiatives included the launch of "Family Matters"; a newsletter that shares ministry success stories, profiles innovation and excellence, and communicates relevant information in an informal reader-friendly format.
- The ministry's Website Review Project was launched to improve navigation, update existing material, remove obsolete material and build a more service-oriented site.
- Internal communication was strengthened by frequent updates to staff from the Deputy Minister.
- The ministry introduced Bill 45 (2004), the *Community Living Authority Act*, to the Legislature on May 19, 2004 as an exposure bill. The bill was passed in the Legislature on October 6, 2004 after house amendments added a requirement that two directors of the new authority's board be individuals with a developmental disability.
- The Act is expected to be brought into force in the Summer of 2005 to establish the new authority, Community Living British Columbia. CLBC will be responsible for providing services to individuals with developmental disabilities and some children with special needs.
- We developed an Enterprise Risk Management (ERM) three year plan and completed the first year's implementation integrating ERM into business and operational planning.

Strategies

1. Implement a comprehensive human resource plan to manage and support staff through the transformation of the ministry's service delivery system.
2. Demonstrate commitment to controlling regulatory burden and regulatory quality through compliance with the Regulatory Reform Criteria set out in the Regulatory Reform Policy.
3. Implement a comprehensive Internal Stakeholder Relations Plan.
4. Amend existing or create new legislation as required to support the ministry's requirements.
5. Implement an integrated approach to risk management throughout the ministry.
6. Improve MCFD's service delivery procurement method, from the current practice of funding inputs and facilities to an outputs/outcomes method for paying the actual cost per unit of client services provided.
7. Implement a comprehensive accountability and performance management system.

Performance Measures — Objective 3.2

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Reduce the ministry's regulatory burden by 40 per cent.	30% reduction from baseline 16,963 (June 2001)	40% reduction from baseline by June 30, 2004	53% (June 2004)	13%	✓✓

✓✓: Target exceeded; ✓: Target met; ✖: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• Target was exceeded. • In the three years ending in June 2004, the ministry reduced its regulatory burden by 53 per cent. • MCFD received the Deregulation Sprint Award from the Deregulation and Regulatory Reform Office for being the first ministry to achieve a one-third reduction.
What was measured?	• The total reduction in the number of regulatory requirements for which MCFD is responsible.
Changes to this measure in the 2005/06–2007/08 Service Plan.	• In the 2005/06–2007/08 Service Plan, this measure has been not been included due to the successful completion of this government-wide initiative. It has been replaced by a measure designed to monitor MCFD's regulatory burden: *Per cent increase to the number of regulatory requirements set at June, 2004* and the target has been set at 7,945, or a zero per cent increase.

Performance Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Ministry rating of Enterprise-wide Risk Management implementation (based on government-endorsed Risk Maturity Index rating scale).	Baseline 0 *New Measure*	"2" Rating	2	0	✓

✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The ministry has achieved the overall target of level 2.
What was measured?	• Ratings on scale of 1 – 5 on the Risk Maturity Matrix which includes the following key risk management areas: • organizational philosophy/culture regarding risk management; • risk management leadership and commitment; • integration with other management practices and systems; • risk management capabilities; and • risk management reporting and control.
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In 2005/06 – 2007/08 Service Plan, this measure has not been included and will be monitored internally.

Goal 4: The child care system is sustainable and meets the needs of British Columbia families.

Early childhood experiences affect us throughout our lives. While parents have the primary responsibility for their children, many children spend a significant amount of time in care settings outside the home. The 2003 Parent Child Care Needs Assessment Survey found that 46 per cent of children six and under are in some form of non-parental child care.

Quality child care is a cornerstone of early childhood development. Alongside parenting and other early childhood development initiatives, child care supports all facets of children's healthy growth and contributes to increased school readiness, better school performance and increased chances of high school graduation. Together, these outcomes lead to better educated, more employable, healthier citizens.

B.C. has programs that promote quality child care and help parents with its cost. Provincial services help lower-income parents through subsidies; assist child care operators through capital and operating funds; and support child care workers and parents through training, professional development, and parent and provider referrals.

Responsibility for government's child care programs and services was transferred in June 2004 to MCFD from the Ministry of Community, Aboriginal and Women's Services. This transfer allows child care programs to be housed together with government's other early childhood development initiatives, providing a continuum of quality services for children, youth and their families. As this transfer occurred during the fiscal year 2004/05, MCFD will report on the objectives and measures that fall within this continuum. However, it should be noted that objectives and measures have been revised in the 2005/06–2007/08 MCFD Service Plan to better reflect the mission of the Ministry of Children and Family Development.

Core Business Area: Child and Family Development

Objective 4.1: More child care spaces are available.

An increase in the number of safe and affordable child care spaces will give B.C. families greater choice and more quality child care options in their communities, to meet their diverse needs.

Progress on this Objective

- In 2004/05, government funded a total of 18 major capital projects affecting 518 new licensed group child care spaces around B.C. An additional 135 projects enhanced and supported 4,545 spaces in B.C. child care facilities through the minor capital program.
- The MCFD major capital program allocates a high percentage of government funding to small rural communities, where it is often more difficult to raise the money needed to build centres providing child care services. As a result of this provincial capital funding, communities are better able to embark on construction projects which lead to the creation of more licensed non-profit child care spaces.

- In July 2004, government increased child care capital funding by $1 million, allowing more B.C. child care centres to apply for funds to create new spaces, and maintain and repair existing spaces.
- In January 2005, the Safe Play Space Program was included as part of the child care capital program on a one-time-only basis for fiscal 2004/05. The Safe Play Space Program helps licensed non-profit group child care facilities meet the cost of replacing outdoor playground equipment to conform to new CSA standards.
- In 2004/05, the province invested $48 million to support the operating costs of 3,870 B.C. child care facilities.
- In July 2004, an additional $1.1 million for child care operating funding was announced, to assist over 600 licensed before-school and after-school child care providers across the province.
- We increased funding for Child Care Resource and Referral Centres (CCRRs), which allowed these centres to focus on registering more licence-not-required providers; assisting providers to meet safety and training requirements; and offering parents information and referrals to support them in making quality child care choices. In fiscal 2004/05, over 31,000 B.C. families were referred to child care services.

Strategies

1. Implement the long-term plan for child care, including an investment plan for child care dollars.
2. Improve service delivery, systems and business processes in child care and subsidy programs.

Performance Measures — Objective 4.1

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of funded child care facilities.[1]	3,600 base	3,700	3,870	170	✓✓
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• The target of 3,700 facilities, representing an increase of 100 over the baseline, has been exceeded by 170 facilities.				
What was measured?	• The total number of active licensed child care facilities that are funded under the child care operating fund.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure has been excluded in the 2005/06 – 2007/08 Service Plan. • Child care operating fund data is available online at http://www.mcf.gov.bc.ca/childcare/ *.				

[1] "Service providers" changed to "facilities" to clarify interpretation of the data because a single child care provider could operate multiple facilities.

* *Refer to note on page 3.*

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of licensed child care spaces available for families in B.C.	75,000	76,500	N/A — data not available.	N/A — data not available.	N/A — data not available.
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• 2004/05 data on the number of all licensed child care spaces (funded and non-funded) is not available at this time. • Although the data required for this measure is not available, initial indicators from the child care operating fund database indicates a positive trend. During 2003/04, 71,642 *government funded* licensed child care spaces were available compared to 76,440 in 2004/05, an increase of 4,798 spaces.				
What was measured?	• The total number of funded licensed child care spaces available to B.C. families.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure has been modified as: *Number of regulated child care spaces available* to include both licensed and licence-not-required service providers.				

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Per cent of eligible child care centre-based facilities[1] that are funded.	75%	80%	N/A — data not available	N/A — data not available	N/A — data not available

✓✓: Target exceeded; ✓: Target met; ✖: Target missed; N/A: Not applicable.

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• 2004/05 data on the number of all licensed child care facilities (funded and non-funded), which is required to calculate the per cent of eligible centre-based facilities that are funded, is not available at this time. • Although the data required for this measure is not available, the number of centre-based facilities that are funded has increased from 1,903 facilities on March 31, 2004 to 2,016 facilities on March 31, 2005, an increase of 113 facilities or six per cent.
What was measured?	• The total number of eligible centre-based (group) child care facilities currently receiving child care operating funding as a percentage of the total number of eligible licensed centre-based child care facilities in B.C. • It does not include any other funding programs.
Changes to this measure in the 2005/06–2007/08 Service Plan.	• This measure has not been included in the 2005/06–2007/08 Service Plan. • Child care operating fund program data is available at http://www.mcf.gov.bc.ca/childcare/ *.

[1] "Child care" added to clarify interpretation of the data. "Providers" changed to "facilities" to clarify interpretation of the data because a single child care provider could operate multiple facilities.

* *Refer to note on page 3.*

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Per cent of licensed child care family facilities[1] that are funded.	65%	65%	N/A — data not available.	N/A — data not available.	N/A — data not available.
✓✓: Target exceeded; ✓: Target met; ✖: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• 2004/05 data of the number of licensed child care facilities, which is required to calculate the per cent of licensed family facilities that are funded, is not available at this time. • Although the data required is not available for this measure, the number of licensed family facilities that are funded has increased from 1,795 facilities on March 31, 2004 to 1,854 facilities on March 31, 2005, an increase of 59 facilities.				
What was measured?	• The total number of eligible licensed family child care facilities that are funded under the Child Care Operating fund as a percentage of the total number of eligible licensed family child care facilities in B.C.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• In the 2005/06 – 2007/08 Service Plan, this measure has not been included. • Child care operating fund program data is available at http://www.mcf.gov.bc.ca/childcare/ *.				

[1] "Child care" added to clarify interpretation of the data. "Providers" changed to "facilities" to clarify interpretation of the data because a single child care provider could operate multiple facilities.

Objective 4.2: Low income families are better able to meet the cost of child care.

Ensuring that low income families have access to child care is important both from a social and an economic perspective. Low income families are better prepared to participate in education or employment if they are able to pay for child care. The province's Child Care Subsidy Program supports low income families who choose to use child care.

MCFD increased the income threshold at which families become eligible for the program. As a result, thousands of additional B.C. families are now eligible for child care subsidies. This expansion has been specifically targeted at improving child care options for low-income families, children with special needs and eligible parents with student loans.

Progress on this Objective

- In 2004/05, government provided a $43 million boost to child care spending, including $33 million for new and enhanced subsidies. This made child care available for thousands more B.C. children.

* *Refer to note on page 3.*

- MCFD extended subsidies to non-working parents so their children can attend community-based pre-school; an additional 2,000 children are eligible to benefit.
- We eliminated the $50 minimum payment for Child Care Subsidy so that many families are now eligible to receive partial subsidy for child care.
- We increased the Child Care Subsidy income threshold by $200 for parents working or going to school; increased the Child Care Subsidy income threshold by $100 for families of children with special needs; and increased the special needs supplement from $107 to $150. These increases target more child care subsidy funding to low-income families, children with special needs, and eligible parents with student loans.
- Increased partial subsidies and subsidy rates for children under six years old in licensed or registered child care.
- We provided special one-time funding to Aboriginal and multicultural agencies, as well as to eligible early childhood education students and organizations that train child care providers, in cultural, language and literacy needs.

Strategies

1. Deliver the Child Care Subsidy Program.
2. Implement a client service plan to meet language and literacy needs.

Performance Measure — Objective 4.2

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Number of child care[1] subsidies for children of eligible parents.	28,000	30,600	25,082	(5,518)	✗
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• The target of 30,600 has not been met. • As of March 31, 2005, based upon claims submitted by providers, the average number of subsidies for children of eligible parents per month was 25,082. • Subsidy is a demand driven program. While total spending has increased as a result of increased subsidy rates, the number of families accessing subsidies has decreased. MCFD anticipates that the number of subsidies will increase in response to broadened eligibility criteria introduced in Fall 2004 and further changes in January 2005 to child care subsidy criteria that enables more families to be eligible for subsidy.				
What was measured?	• The average number of subsidies provided to children of eligible parents on a monthly basis.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• No change has been made to this measure in the 2005/06 – 2007/08 Service Plan.				

[1] "Child care" added to measure to clarify interpretation of the data.

Objective 4.3: Government is enabled to make informed decisions on issues that affect child care services.

Decisions regarding child care in British Columbia require accurate information and analysis that is reliable, relevant and comprehensive. The evidence-based approach applies the best available research and data to policy decisions about programs and service delivery systems. This helps improve services, increases the efficiency of service delivery and achieves better value for money.

Progress on this Objective

- We have completed evaluation frameworks for four child care programs. In addition, work has begun on a national evaluation framework in support of the 2003 multi-lateral Early Learning and Child Care agreement (ELCC). The completed framework will guide the evaluation of B.C.'s programs and services.
- Initiatives are underway with the Ministry of Health Services and the regional Health Authorities to develop performance measures and reporting mechanisms that will ensure current and consistent data collection and reporting on licensed facilities and child care spaces.

Strategies

1. Develop options to continue implementation of a long-term strategy for federal contributions toward child care.
2. Develop or improve research, information management systems and policy analysis tools.
3. Continue to monitor and evaluate the operating and capital funding programs.
4. Strengthen accountability through revised program standards and reporting requirements.

Performance Measures — Objective 4.3

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Implement new child care funding based on allocation of federal funding.[1]		Implement and assess	Implemented and assessed	0	✓
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					

KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE	
Performance Analysis.	• The target was met. • This will enable more eligible low-income families to access child care subsidies.
What was measured?	• Implementation of new funding based on federal funding for designated services for children under the age of six as per the 2003 - 2008 Early Learning and Child Care (ELCC) multi-lateral agreement.
Changes to this measure in the 2005/06 - 2007/08 Service Plan.	• This measure is not included in the 2005/06 - 2007/08 Service Plan. Full reporting will be available through the Early Learning and Child Care (ELCC) Annual Report.

[1] "Child care" added to measure to clarify interpretation of the data.

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Child care[1] subsidy forecasting model developed.	No formal model	Complete	Completed	0	✓
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• The target was met.				
What was measured?	• The completion of the development of a subsidy forecasting model.				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure has been completed and therefore excluded from the 2005/06 – 2007/08 Service Plan.				

[1] "Child care" added to measure to clarify interpretation of the data.

Measure	2003/04 Base	2004/05 Target	2004/05 Actual	Variance	Target Met?
Evaluate the following programs: • Child care operating; • Capital projects; • Resource and referral centre; and • Child care subsidy (formerly parent subsidy).	4 programs selected for evaluation	No 2004/05 target	Evaluation frameworks completed for all four programs	N/A	No 2004/05 target — not applicable.
✓✓: Target exceeded; ✓: Target met; ✗: Target missed; N/A: Not applicable.					
KEY INFORMATION WE NEED TO REPORT ON THIS MEASURE					
Performance Analysis.	• After this measure was established, work began on a national evaluation framework in support of the 2003 multi-lateral Early Learning and Child Care (ELCC) agreement. The national framework will inform the evaluation of B.C.'s programs and services • There were no 2004/05 targets so "variance" and "target met?" are not applicable.				
What was measured?	• N/A				
Changes to this measure in the 2005/06 – 2007/08 Service Plan.	• This measure is not included in the 2005/06-2007/08 Service Plan. • The evaluation of child care programs will be done as part of the ministry's comprehensive ministry audit and evaluation strategy.				

Report on Resources

2004/05 Resource Summary

	Estimated[1]	Other Authorizations[2]	Total Estimated	Actual	Variance (Actual minus Total Estimated)[3]
Operating Expenses ($000)					
Community Living Services	609,573	—	609,573	620,395	10,822
Child and Family Development	661,722	—	661,722	651,780	(9,942)
Provincial Services	94,028	—	94,028	90,769	(3,259)
Executive and Support Services	16,245	1,865	18,110	20,489	2,379
MCFD Total	**1,381,568**	**1,865**	**1,383,433**	**1,383,433**	**0**
Child Care Services		173,270	173,270	173,097	(173)
Total Operational	**1,381,568**	**175,135**	**1,556,703**	**1,556,529**	**(173)**
Adjustment to Prior Year Accrual	0	—	0	(30,989)	(30,989)
Total	**1,381,568**	**175,135**	**1,556,703**	**1,525,540**	**(31,162)**
Full-time Equivalents (Direct FTEs)					
Community Living Services	455	—	455	460	5
Child and Family Development	2,641	—	2,641	2,650	9
Provincial Services	711	—	711	610	(101)
Executive and Support Services	176	—	176	183	7
MCFD Total	**3,983**	—	**3,983**	**3,903**	**(80)**
Child Care Services	151	—	151	158	7
MCFD Total	**4,134**	—	**4,134**	**4,061**	**(73)**

[1] The "Estimated" amount corresponds to the *Estimates* as presented to the Legislative Assembly on February 17, 2004.

[2] "Other Authorizations" include Supplementary Estimates, Statutory Appropriations and Contingencies. This reflects the transfer of child care into MCFD in June 2004.

[3] Variance display convention has been changed this year to be consistent with the change introduced in public accounts. Variance is in all cases "Actual" minus "Total Estimates". Where the Actual is greater the Variance is displayed without brackets.

	Estimated[1]	Other Authorizations[2]	Total Estimated	Actual	Variance (Actual minus Total Estimated)[3]
Ministry Capital Expenditures (Consolidated Revenue Fund) ($000)					
Executive and Support Services	9,795	—	9,795	5,787	(4,008)
MCFD Total	**9,795**	—	**9,975**	**5,787**	**(4,008)**
Child Care Services	1,250	—	1,250	811	(439)
Total	**11,045**	—	**11,045**	**6,598**	**(4,447)**
Consolidated Capital Plan ($000)					
Community Living Services	7,040	—	7,040	12	(7,028)
Child and Family Development	2,660	—	2,660	0	(2,660)
Provincial Services	2,132	—	2,132	0	(2,132)
Executive and Support Services	0	—	0	0	—
Total	**11,832**	—	**11,832**	**12**	**(11,820)**
Other Financing Transactions ($000)					
Executive and Support Services — Human Services Providers Financing Program					
Receipts	0	—	0	53	—
Disbursements	0	—	0	—	—
Net Cash Source (Requirements)	146	—	146	53	(93)
Total Receipts	**146**	—	**146**	**53**	**(93)**
Total Disbursements	**0**	—	**0**	—	—
Total Net Cash Source (Requirements)	**146**	—	**146**	**53**	**(93)**

[1] The "Estimated" amount corresponds to the *Estimates* as presented to the Legislative Assembly on February 17, 2004.

[2] "Other Authorizations" include Supplementary Estimates, Statutory Appropriations and Contingencies. This reflects the transfer of child care into MCFD in June 2004.

[3] Variance display convention has been changed this year to be consistent with the change introduced in public accounts. Variance is in all cases "Actual" minus "Total Estimates". Where the Actual is greater the Variance is displayed without brackets.

Explanation of Budget by Core Business Areas

The annual budget is based on core business assumptions contained in the ministry's three-year service plan. The plan was based on forecasts of expenditures and caseload trends, plus anticipated impacts of legislation, policy and program changes. The variance between the total estimated and the actual expenditures for each Core Business reflect fluctuations primarily in caseload and program demand. The ministry met its overall budget target for 2004/05.

Community Living Services (CLS)

The over expenditure of $10.8 million (or two per cent of the CLS budget) mainly reflects the increase in the number of adults with developmental disabilities served as a result of meeting the growing demand for services. Demand pressures include increased number of children requiring care when they reach the age of nineteen, and ageing caregiver population relying more on supports and services to help care for their adult children with developmental disabilities.

Child and Family Development (CFD)

The under expenditure of $9.9 million (or two per cent of the CFD budget) was due to:

- greater than expected reduction in administration costs, lower than anticipated planning costs for community governance and lower Family Development costs.
- increased use of less costly out-of-care options for children.

Provincial Services

The under expenditure of $3.3 million (or four per cent of the Provincial Services budget) was primarily due to declining counts of youth in custody.

Executive and Support Services

The over expenditure of $2.4 million (or 25 per cent of the Executive and Support Services budget) was due to higher than anticipated information technology and staffing costs.

Child Care Services

Responsibility for Child Care Services was transferred to the ministry effective June 30, 2004. There is no significant variance between budget and expenditures.

Capital Expenditures

The under expenditure of $4.4 million (or 40 per cent of the Capital Expenditures budget) was due to changing priorities in the information technology capital plan.

Adjustment to Prior Year Accrual

Amounts reflect adjustment of prior year's expense accruals which were credited to revenue and therefore not available for the ministry to spend. In 2004/05 the adjustment was credited to ministry expense and again was not available for spending.

Capital Plan

The under expenditure of $11.8 million was mainly due to the cancellation of group home and other projects that were in the pre-planning stage.

Deregulation

The ministry's deregulation project is complete. Between June 2001 and June 2004, the ministry's was to reduce the regulatory burden by 40 per cent. This target was exceeded as the ministry reduced the regulatory burden by 53 per cent, from the baseline of 16,963 regulatory requirements down to less than 8,000.

Appendix 1: Information to Note

Key Contact Information

- For phone numbers and addresses of ministry offices see the provincial government blue pages of a telephone book, or view the information online: http://www.mcf.gov.bc.ca/roc/index.html *.
- The mailing address for the Ministry of Children and Family Development is: PO Box 9721 Stn Prov Govt Victoria, BC V8W 9S2.
- For the latest information on the process of transferring most ministry services to community-based governance bodies, visit: http://www.mcf.gov.bc.ca/change/ *.

Helpline for Children in British Columbia

- Phone **310-1234**, free from anywhere in the province anytime, or to use the telephone device for the deaf, dial **1 866 660-0505**. The Helpline for Children provides round-the-clock access to professionals to respond to concerns that a child under age 19 years may be abused. Abuse can be abandonment, desertion, neglect, ill-treatment or failure to have physical, emotional or medical needs met. Calls can be anonymous — and abuse can be stopped. For online information visit: http://www.mcf.gov.bc.ca/child_protection/reporting_child_abuse.htm *.

Media Site — for the latest news on key ministry activities

- http://www.mcf.gov.bc.ca.media_site/ *.

Adoption Site — for information on adopting one of B.C.'s waiting children

- For information on adopting a child, phone toll-free in BC: **1 877 ADOPT 07 (1 877 236-7807)** or phone a nearby ministry office. Hundreds of children in the permanent care of the ministry are waiting to be adopted into permanent, loving families. Applicants do not need to be married, wealthy or a certain age to adopt a waiting child. Please phone today for information or visit: http://www.mcf.gov.bc.ca/adoption/index.html *.

Be a Foster Parent — BC's foster parents make a positive difference for vulnerable children in need

- For information, phone the B.C. Federation of Foster Parent Associations' Fosterline at **1 800 663-9999** (outside BC phone **1 604 660-7696**) or the Federation of Aboriginal Foster Parents Association toll-free at **1 866 291-7091**. For online information visit: http://www.mcf.gov.bc.ca/foster/index.html *.

* *Refer to note on page 3.*

Interim Authority Community Living British Columbia's Website

- The provincial interim authority's website provides up-to-date information on work relating to the transition of services to a permanent governing authority. For online information visit: http://www.interimauthorityc.bc.ca/ *.

* Refer to note on page 3.

Appendix 2: Glossary of Terms

ALTERNATIVE DISPUTE RESOLUTION (ADR): an option for resolving family differences instead of going through the court system. Examples include family group conferencing and mediation.

CHILD CARE: refers to the care and supervision of a child in a child care setting, other than: a) by the child's parent; or, b) while the child is attending an educational program provided under the *School Act* or the *Independent School Act*.

CHILD-IN-CARE OR CHILDREN-IN-CARE: refers to any child under 19 years of age in the care of the Director under the *Child, Family and Community Services Act*.

CHILDREN WITH SPECIAL NEEDS: refers to children with a broad range of needs. Some of the children have a diagnosis of Fetal Alcohol Spectrum Disorder, but many do not. Those noted as "substance exposed" are generally mild to moderately exposed, based on birth family history information.

DELEGATED AGENCIES: refers to Aboriginal agencies with delegated child welfare authority under the *Child, Family and Community Services Act*.

FAMILY DEVELOPMENT RESPONSE (FDR): an alternative to child protection investigations that focuses on parental involvement, assessing a family's strengths and risks, and providing services as required by the child and family. These may include parenting programs, anger management, counselling, mental health and other services.

HIGH-RISK YOUTH: refers to youth that are at risk of being sexually exploited, addicted to drug(s) or alcohol, living on the street, or have a mental health problem.

SAFE CARE: refers to the provision of brief periods of involuntary care to protect commercially sexually exploited youth and to develop a plan for voluntary community supports and services.

SEXUALLY EXPLOITED YOUTH: refers to a person under the age of 19 who has been manipulated or forced to engage in sexual activity in exchange for money, drugs, food, shelter or other considerations.

SUPPORTED CHILD DEVELOPMENT (previously referred to as supported child care): a range of consulting and support services that support children with special needs, ages birth up to 12 to be included in regular child care settings.

Appendix 3: Additional Performance Information

Performance Measure: Satisfaction of individuals with services received	
Why did we choose to measure it?	• Client satisfaction information supports quality improvement efforts and demonstrates value to clients to ensure that programs, products and services are delivered as effectively and efficiently as possible.
How was the target selected?	• This was a new measure, therefore the baseline and associated target were under development.
What is the multi-year trend?	• This is a new measure, therefore multi-year trend data is not available.
What are the things to keep in mind when reading the results?	• The accreditation process more efficiently assesses client satisfaction with programs, products and services and what changes might be advantageous. This measure helps to determine how well programs are working from the client's perspective and what changes might be required.
How did we measure it?	• As the intended survey was replaced with the progressive implementation of accreditation, which provides a more comprehensive measure of service quality, the ministry did not proceed with measurement of satisfaction in this manner.
Where did we get the data?	• Data not collected because the originally intended satisfaction survey was not completed.

Performance Measure: Number of adults and families of children with special needs who receive direct or individualized funding (IF/DF)	
Why did we choose to measure it?	• The number of adults and families of children with special needs that are using IF/DF tells the ministry about the usage of this type of financial support. • IF/DF puts service providers in the position of having to respond directly and be accountable to the consumers of their services, as well as providing increased options and flexibility to individuals and their families. • Funding is provided directly to families of children with special needs to purchase intervention or support services. • IF/DF aims to improve outcomes for adults with developmental disabilities and for children and youth with special needs. • Individualized funding was a key strategy in the 2004/05 Service Plan and an important element of CLBC's proposed service transformation.
How was the target selected?	• The new measure in the 2004/05 – 2006/07 Service Plan had a baseline of 3,150 families of children with special needs for 2003/04. The target for 2004/05 was 4,200 individuals (adults with developmental disabilities and families of children with special needs) receiving IF/DF. • IF/DF began as a joint initiative with the Interim Authority for Community Living B.C. in 2003/04. The target was selected to determine the uptake of new and existing individualized and direct funding programs in MCFD.
What is the multi-year trend?	• This is a new measure therefore multi-year trend data is not available.
How did we measure it?	• Number of families of children with special needs who receive direct or individualized funding (Autism Funding: Under Age Six, Autism Funding: Ages 6 – 18, At Home Respite and Supported Child Development).
What are the things to keep in mind when reading the results?	• Although implementation of IF/DF for adults has been put on hold, it is a priority for CLBC. • IF/DF is intended to improve outcomes by allowing families and individuals to tailor services to their unique needs.

Performance Measure: Percentage of children (aged 4–6) and youth (aged 17–19) with special needs that have completed transition plans	
Why did we choose to measure it?	• For children and youth with special needs and their families, transitions at key developmental stages can be challenging. Having a transition plan in place for these individuals will increase their chances for success.
How was the target selected?	• It was anticipated that the number of individuals that completed transition plans in 2004/05 would be double that of the previous year.
What is the multi-year trend?	• New measure therefore multi-year trend is not available.
How did we measure it?	• N/A
What are the things to keep in mind when reading the results?	• N/A
Where did we get the data?	• N/A

Performance Measure: Percentage of individuals served in family model homes	
Why did we choose to measure it?	• Family model homes are the residential setting of choice for adults with developmental disabilities. • Encouraging these placements when appropriate is best practice and one of the keys to ensuring community-based, inclusive and sustainable CLS services in the future.
How was the target selected?	• The target represented a goal to support more individuals to live in settings that matched the individual's assessed need with type of resource.
What is the multi-year trend?	• New measure therefore multi-year trend not available.
How did we measure it?	• The measure reflects data received by the regions on a monthly basis. From the data, an overall percentage of occupancy for the province was calculated. • The measure for 2004/2005 represents a change in methodology from how the baseline (November 2003) was measured.
What are the things to keep in mind when reading the results?	• This measure will continue to evolve as innovations to service delivery are developed based on best practices. • As regions place individuals, when appropriate, into family model homes and semi-independent living arrangements, overall occupancy proportions will eventually reach the original target established.
Where did we get the data?	• Resource and Payment Systems (RAPS) and monthly regional reporting.

Performance Measure: Number of new public/private partnerships to raise awareness and commitment to Fetal Alcohol Spectrum Disorder (FASD) prevention	
Why did we choose to measure it?	• This measure was chosen because long-term and sustainable capacity building in the early childhood sector is dependent on the investment of the broader community — beyond government. Private/public partnerships encourage this investment from community and corporate stakeholders.
How was the target selected?	• Private-public partnerships in the social service sector are a relatively new phenomenon. We expect to see continued growth in the number and extent of such partnerships yet must have realistic expectations about the potential for growth in this area.
What is the multi-year trend?	• New measure therefore multi-year trend not available.
How did we measure it?	• The count of the new and existing partnerships at the end of the fiscal year.
What are the things to keep in mind when reading the results?	• See comments in "How was the target selected?"
Where did we get the data?	• Early Childhood Development Branch — MCFD.

Performance Measure: Percentage (number) of children up to age six on the wait list for supported child development (formerly Supported Child Care)	
Why did we choose to measure it?	• SCD permits children with special needs to participate in regular child care options. The intention was to increase access to services and reduce waitlists for SCD. The refocus provides inclusive community-based child care options for children with special needs with the goal of increasing social inclusion and school readiness.
How was the target selected?	• Estimation of additional services that could be provided with additional funding available under the 2003 – 2008 Early Learning and Child Care multi-lateral agreement.
What is the multi-year trend?	• New measure therefore multi-year trend not available.
How did we measure it?	• Survey of providers to determine waitlist numbers and services provided.
What are the things to keep in mind when reading the results?	• Of the 2,922 services provided to children under age six in 2004/05, 539 were Aboriginal. • MCFD tracks the number of services provided to children and children may receive more than one service. • The waitlist includes children waiting for new SCD services and those already being served but needing extra staffing supports. • Waitlists fluctuate throughout the year, based on timing of agency reporting. • Data is reported manually by SCD agencies. Development of a common data management system will standardize reporting, allowing for a profile of all services accessed by individual children and their families.
Where did we get the data?	• Annual survey and regional reporting.

Performance Measure:	Number of community-based initiatives designed to prevent Fetal Alcohol Spectrum Disorder (FASD)
Why did we choose to measure it?	• This new measure is based on the provincial FASD strategic plan. • FASD prevention initiatives are expected to contribute to a reduction in the incidence of FASD, resulting in improved health status and reduced life-long costs that would otherwise be associated with FASD at the community level.
How was the target selected?	• The target was selected based on the 2004/05 funding for FASD initiatives.
What is the multi-year trend?	• This is a new measure therefore no multi-year trend data is available.
How did we measure it?	• Annual count of the number of FASD prevention-focussed initiatives funded by MCFD.
What are the things to keep in mind when reading the results?	• Community awareness and prevention activities rely on strong grassroots partnerships among service providers. • This measure supports the ongoing development of a stronger knowledge base so community members will learn of a wider range of methods to reduce the number of infants prenatally exposed to alcohol and other drugs, subsequently leading to an increased number of healthy pregnancies.
Where did we get the data?	• Early Childhood Development Branch — MCFD.

Performance Measure:	Number of Aboriginal communities with early childhood development (ECD) initiatives
Why did we choose to measure it?	• This measure represents progress toward building capacity in Aboriginal communities to support early childhood and family development.
How was the target selected?	• The target was chosen in order to encourage all five regions to support ECD initiatives.
What is the multi-year trend?	• The number of Aboriginal communities with early childhood development programs continues to surpass the targets set, highlighting growth and program sustainability over time.
How did we measure it?	• Yearly count of number of Aboriginal communities with ECD initiatives funded.
What are the things to keep in mind when reading the results?	• An Aboriginal community is as defined by the particular community. • An initiative in a single community may have several project components.
Where did we get the data?	• Early Childhood Development Branch — MCFD.

Performance Measure: Number of out-of-care placements	
Why did we choose to measure it?	• This new measure for 2004/05 was based on Child and Family Development Service Transformation initiative. • An increase in out-of-care placements builds on family strengths and maintains the continuity of family and community relationships, contributing to better outcomes for children, youth and families.
How was the target selected?	• Target was selected through consultation with the regions based on practice experience and evidence from implementation in previous years.
What is the multi-year trend?	• Multi-year trend is not available.
How did we measure it?	• Counts from MCFD regions.
What are the things to keep in mind when reading the results?	• Out-of-care placements were introduced in 2002/03. In 2003/04 social workers used out-of-care placements for two populations: children already in care who would be better served through an out-of-care placement; and children who might otherwise have been brought into care. As a result, the children who were in care and who would be better served with an out-of-care placement were identified in 2003/04 and supported in a planned transition to an out-of-care placement. During that same time period, children were not admitted into care where an appropriate out-of-care placement was identified as a viable option. • By 2004/05, there were significantly fewer children in care who could or should be moved to an out-of-care placement. Therefore the focus is now on seeking out-of-care placements for children rather than bringing them into care. • The data collection methodology was refined and the new baseline reflects the improved methodology.
Where did we get the data?	• The revised baseline data and the 2004/05 totals are from the ministry's information system.

Performance Measure:	Percentage (number) of child welfare interventions that are resolved through alternative dispute resolution processes (ADR)
Why did we choose to measure it?	• To demonstrate the efficacy of utilizing ADR as a case management tool. ADR processes have been demonstrated to be effective and efficient in resolving family and community issues, leading to better and more timely outcomes for children and families.
How was the target selected?	• The target selected based on considerations of staff capacities, additional training to be delivered in 2004, and improvement in the reporting and collection of ADR statistics.
What is the multi-year trend?	• This is a new measure therefore multi-year trend data is not available.
How did we measure it?	• Number of completed mediations plus the number of completed Family Group Conferences to get total number of ADR events completed in fiscal year.
What are the things to keep in mind when reading the results?	• The originally stated measure was "the percentage of child welfare interventions resolved through ADR". This measure was modified because of issues that arose in defining the measure and developing the data collection methodology. ADR is utilized to resolve a variety of disputes in child welfare. This includes disputes as to the legal status of the child, placement, short and long-term plans for children and families. ADR is used to resolve issues between MCFD and families, foster parents and others. Given this breadth, it was not possible to accurately identify and count the number of child welfare interventions to use in calculating the original measure. • The reported numbers reflect the number of ADR events completed. These numbers do not include cases referred to ADR where the mediation or family group conference has not proceeded, although in some cases the preliminary work of the mediator or family group conference coordinator has assisted in resolving the matter, and the ADR is no longer needed. • Not all of the completed ADR events lead to resolution of all of the issues. However, research shows that ADR is an effective tool for resolving disputes. For example, in the review and evaluation of the Surrey Court Project 83 per cent of cases had all issues resolved, 12 per cent had some issued resolved, and only five per cent had no issues resolved.
Where did we get the data?	• The source information for the number of mediations completed is reports generated by the Ministry of Attorney General's Dispute Resolution Office. The source information for the number of completed Family Group Conferences is manual counts conducted in each region.

Performance Measure: Number of service delivery sites where collaborative service approaches are in place	
Why did we choose to measure it?	• Integrated service delivery approaches that include alternate community-based programs reduce the fragmentation of child and family services and are more responsive to the needs of the community, promoting better outcomes for children, youth and families.
How was the target selected?	• There was no baseline information available for this measure. The target was set to ensure that a reasonable minimum number of collaborative service sites were in place before the end of the 2004/05 fiscal year.
What is the multi-year trend?	• This was a new measure therefore multi-year trend data is not available.
How did we measure it?	• Manual counts conducted by regional staff.
What are the things to keep in mind when reading the results?	• The data includes a range of approaches from a relatively simple co-location of two ministries or agencies to an elaborate collaborative service delivery centre involving numerous organizations.
Where did we get the data?	• Child and Family Development Division — MCFD.

Performance Measure: Percentage of Aboriginal children in care served by delegated Aboriginal agencies	
Why did we choose to measure it?	• The target indicates a step towards our goal to have all Aboriginal children in care served by delegated Aboriginal agencies.
How was the target selected?	• The ministry's plan in 2002/03 was to transfer 1,500 children in care to the care of Aboriginal agencies. Given that there were more than 4,200 Aboriginal children and youth in the ministry's care at the time of the establishment of the target, the target should have been 35 per cent based on the number of agencies in development.
What is the multi-year trend?	• The trend is moving in the desired direction with almost one third of Aboriginal children in care served by delegated agencies.
How did we measure it?	• The count was made on a monthly basis from Management Information system (MIS) and Social Worker Information System (SWS).
What are the things to keep in mind when reading the results?	• The development of delegated agencies through the tri-partite process has taken longer than anticipated. It is expected that more agencies will be delegated to take on guardianship responsibilities in 2005/06 allowing for the transfer of more children in care. • Some delegated agencies have not yet assumed responsibility to deliver a full range of services.
Where did we get the data?	• SWS/MIS, Child and Family Development Division — MCFD.

Performance Measure: Percentage of Aboriginal children in care of the ministry who are being cared for by Aboriginal families	
Why did we choose to measure it?	• This is a new measure for the 2004/05 – 2006/07 Service Plan, based on CFD Service Transformation initiative but previously had been internally monitored. • Caring for Aboriginal children in care in Aboriginal families is an important way of providing effective and culturally appropriate supports and services. • The ministry aims to increase the number of Aboriginal children served by the ministry who are cared for by Aboriginal families to help retain connections with their communities, extended family and cultural heritage.

How was the target selected?	• The baseline was revised to 20 per cent for 2004/05 in the 2005/06-2007/08 Service Plan.
	• The target is based on information from a number of sources:
	  • from our joint work with the Federation of Aboriginal Foster Parents to attract and refer more Aboriginal foster parents;
	  • from our work on the Roots Project, examined plans of care for Aboriginal children; and
	  • from ministry staff who are aware of the benefits of placing Aboriginal children in Aboriginal homes.

What is the multi-year trend?	• Since 2001, the percentage of Aboriginal children in care who are being cared for by Aboriginal families has generally increased.
How did we measure it?	• The results are tracked on a monthly basis in the Resource and Payment System (RAPS).
What are the things to keep in mind when reading the results?	• 50 per cent of Aboriginal children adopted in 2004/05 were adopted by Aboriginal families (69 of 131 adoptions). Approximately 50 per cent of these placements were originally foster placements thereby reducing the number of available Aboriginal foster homes. • This measure is dependent on ministry staff completing the information on RAPS and identifying caregivers as Aboriginal. • The agencies have not had access to RAPS but as of September 2005, the ministry hopes to have corrected the inconsistency between ministry and delegated agencies electronic systems.
Where did we get the data?	• RAPS

Performance Measure: Rate of youth in custody based on a proportion of all 12 – 17 year olds (per 10,000)	
Why did we choose to measure it?	• This is a continuing measure from the 2004/05 – 2006/07 Service Plan. • This measure gauges how much the youth correctional system relies on incarceration and indicates the effectiveness of community-based alternatives to custody.
How was the target selected?	• The target was selected because it reflects historical trends in B.C. and provides a comparison to national and other provincial rates.
What is the multi-year trend?	• The number of youth in the justice system is declining, demonstrating progress toward the goal of minimizing youth involvement in the criminal justice system by providing treatment services and community-based alternatives to custody. There was a steady decrease in youth custody rates that stabilized in 2003/04. A modest increase (three to five per cent) is projected as a result of demographic growth and adjustments in the justice system to the *Youth Criminal Justice Act*.
How did we measure it?	• Custody centre daily counts are collected and reported via the Management Analysis and Reporting System (MARS). General population figures for 12 to 17 year old youth are extracted from B.C. Stats.
What are the things to keep in mind when reading the results?	• B.C. has the lowest youth custody rate in Canada. • Although the overall numbers have declined, the needs profile of youth in custody has increased. Diverting youth with low needs and minor offences to community justice programs has left a higher concentration of youth in custody with special needs (e.g., FASD or mental health) and more serious offence histories. Although there has been a reduction in system capacity and consequently in overall staffing, there has been no reduction in per client staffing and services for the smaller number of youth in custody.
Where did we get the data?	• MARS and B.C. Stats.

Performance Measure: Number of authorities established	
Why did we choose to measure it?	• This is a continuing measure from the 2004/05 – 2006/07 Service Plan.
How was the target selected?	• The initial target was set following the Core Services Review as part of the ministry's strategic shifts.
What is the multi-year trend?	• Permanent authority not yet established.
How did we measure it?	• N/A
What are the things to keep in mind when reading the results?	• The Boyd Report assessed readiness of transferring services and resulted in a planned delay to ensure a comprehensive, no-risk approach to the transfer. • Significant planning and implementation is underway to successfully create CLBC through legislation and transfer of services in Summer 2005.
Where did we get the data?	• N/A

Performance Measure: Reduce the ministry's regulatory burden by 40 per cent	
Why did we choose to measure it?	• Government set targets and timelines for all ministries to reduce their regulatory burdens.
How was the target selected?	• MCFD's target was 40 per cent reduction by June 2004.
What is the multi-year trend?	• Deregulation was a three-year project, from June 2001 to June 2004.
How did we measure it?	• Consistent with deregulation office guidelines.
What are the things to keep in mind when reading the results?	• A significant portion of the reduction was due to duplication in Child, Family and Community Service policy.
Where did we get the data?	• MCFD's deregulation database.

Performance Measure: Ministry rating of Enterprise-wide Risk Management implementation (based on government-endorsed Risk Maturity Index rating)	
Why did we choose to measure it?	• The ministry recognizes risk management as critical to the achievement of its goals and objectives. Enterprise-wide Risk management is a sound practice to manage risk effectively and to incorporate risk awareness and treatment into the processes used to pursue ministry objectives. • It is necessary to have a clear view of the ministry's approach to risk and be able to benchmark its present organizational maturity using a generally accepted framework.
How was the target selected?	• The target was based on government's recommended Risk Maturity Index which is an assessment tool designed to measure risk management capability and provide objectives for improvement.
What is the multi-year trend?	• This is a new measure therefore multi-year trend data is not available.
How did we measure it?	• The ministry used the definitions and criteria in the risk maturity index to assess its level of risk maturity.
What are the things to keep in mind when reading the results?	• Effective risk management requires a cultural change to ensure that this approach informs all of our decision making. • The ministry developed a three-year Enterprise-wide Risk Management (ERM) Plan and set level 2 risk maturity as the target for fiscal year 2004/05. For the next two fiscal years, the target is to achieve level 3 maturity where risk management becomes a routine business process.
Where did we get the data?	• We reviewed business processes in core areas of the ministry against the government's core policy and best practices.

Performance Measure: Number of funded child care facilities	
Why did we choose to measure it?	• The number of facilities receiving this funding is one indicator of government's support for child care service providers.
How was the target selected?	• Streamlining of the process was expected to lead to a modest increase.
How did we measure it?	• Count of all the active facilities funded under the Child Care Operating Funding as of March 31, 2005.
What is the multi-year trend?	• Multi-year trend data is not available because of the amalgamation of funding initiatives in April 2003.
What are the things to keep in mind when reading the results?	• "Funded" means funded under the Child Care Operating Fund and does not include other funding programs, e.g., capital.
Where did we get the data?	• Child Care Operating Fund report for April 20, 2005 of funded facilities at March 31, 2005.

Performance Measure: Number of licensed child care spaces available for families in B.C.	
Why did we choose to measure it?	• Availability of child care is a key need of many families. • Measures the extent to which government supports operators to provide quality licensed child care spaces.
How was the target selected?	• The target was based on the projected participation in the program.
How did we measure it?	• N/A
What is the multi-year trend?	• Multi-year trend data is not available.
What are the things to keep in mind when reading the results?	• Current data on the number of licensed child care spaces is not available at the present time. Most recent data is from March 2003. • Some licensed child care facilities are not eligible for child care operating funding. This includes child minding, e.g., ski hills, shopping malls and those facilities that choose not to participate.
Where did we get the data?	• N/A

Performance Measure: Per cent of licensed child care family facilities that are funded	
Why did we choose to measure it?	• Monitoring the number of licensed family and funded centre-based providers on an ongoing basis informs future planning.
How was the target selected?	• The target was based on the projected participation in the program.
How did we measure it?	• N/A
What is the multi-year trend?	• Multi-year trend data is not available because of the amalgamation of funding initiatives in April 2003.
What are the things to keep in mind when reading the results?	• Current data on the number of licensed child care facilities and spaces are not available.
Where did we get the data?	• N/A

Performance Measure: Per cent of eligible child care centre-based facilities that are funded	
Why did we choose to measure it?	• Monitoring the number of licensed family and funded centre-based providers on an on-going basis informs future planning.
How was the target selected?	• The target was based on the projected participation in the program.
How did we measure it?	• N/A
What is the multi-year trend?	• Multi-year trend data is not available because of the amalgamation of funding initiatives in April 2003.
What are the things to keep in mind when reading the results?	• Current data on the number of licensed child care facilities and spaces are not available.
Where did we get the data?	• N/A

Performance Measure: Number of child care subsidies for children of eligible parents	
Why did we choose to measure it?	• Subsidy utilization is a measure of government support to low income parents for quality child care and to be able to monitor trends to plan for future needs.
How was the target selected?	• Expected uptake based on expanded criteria for subsidy.
How did we measure it?	• The measure is based on claims submitted by providers.
What is the multi-year trend?	• There has been a downward trend in the numbers of children receiving subsidy despite broadened eligibility criteria.
What are the things to keep in mind when reading the results?	• The target for 2004/05 was established before the subsidy forecasting model was developed.
Where did we get the data?	• Data is provided by Ministry of Human Resources management information system.

Performance Measure: Implement new child care funding based on allocation of federal funding	
Why did we choose to measure it?	• It was chosen in order to be accountable for the allocation of federal funding as per the multi-lateral agreement.
How was the target selected?	• The target is discrete.
What is the multi-year trend?	• New measure.
How did we measure it?	• Budgetary monitoring that compares allocations and expenditures.
What are the things to keep in mind when reading the results?	• This measures funding provided in the existing 2003 – 2008 ELCC agreement.
Where did we get the data?	• Finance and Administration Branch — MCFD.

Performance Measure: Child care subsidy forecasting model developed	
Why did we choose to measure it?	• Trend data is essential for planning.
How was the target selected?	• N/A
What is the multi-year trend?	• As the target is discrete, there is no multi-year trend.
How did we measure it?	• N/A
What are the things to keep in mind when reading the results?	• The subsidy forecasting model is an internal tool that is likely to continue to evolve as data quality improves. • Success of the model depends on the quality of the data.
Where did we get the data?	• N/A

Performance Measure: Evaluate the following programs: • Child Care Operating • Capital Projects • Resource and Referral Centre • Child Care Subsidy (formerly Parent Subsidy)	
Why did we choose to measure it?	• Ongoing evaluation of programs is important to ensure that programs continue to deliver effective and efficient services.
How was the target selected?	• The target is discrete.
What is the multi-year trend?	• N/A
How did we measure it?	• N/A
What are the things to keep in mind when reading the results?	• N/A
Where did we get the data?	• N/A